



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to JOHNSON PERSONAL CARE LLC
LEGAL ENTITY

To operate JOHNSON PERSONAL CARE
NAME OF FACILITY OR AGENCY

Located at 502-504 WEST SEVENTH STREET, CHESTER, PA 19013
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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To provide Personal Care Homes
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 16
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.
(MAXIMUM CAPACITY)

Restrictions: _____

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from September 26, 2018 until March 26, 2019,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **143661**

Robert E. Robinson
ISSUING OFFICER

Carolyn K. Ellison
DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility



pennsylvania
DEPARTMENT OF HUMAN SERVICES

SEP 26 2018

Ms. Cheryl A. Austin
Administrator
Johnsons Personal Care, LLC
502 West 7th Street
Chester, Pennsylvania 19013

RE: Johnsons Personal Care Home
License #: 143661

Dear Ms. Austin:

As a result of the Department's Bureau of Human Services Licensing inspection on July 18, 2018 of the above facility, we have found that your facility is in substantial compliance with the regulations, set forth in 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because this is a new legal entity operating the home.

During the inspection, violations on the enclosed License Inspection Summary were found. All violations specified on the License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Your PROVISIONAL license is enclosed, based on substantial but not complete compliance with 55 Pa.Code Ch. 2600.

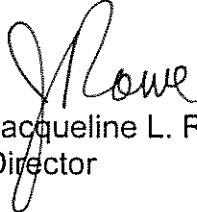
In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services provider application submission experience. To participate in the online applicant survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Application.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential.

Ms. Cheryl A. Austin

The responses will be reviewed as part of an aggregate of provider applicant responses. Thank you in advance for providing feedback.

Sincerely,



Jacqueline L. Rowe
Director

Enclosures
License
License Inspection Summary

Violation Report: 14366 - 07/18/2018 - Gray, Dean
 PCH Name: JOHNSON S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.3(c) - The personal care home shall post the current license, a copy of the current licensing inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

2a. DESCRIPTION OF VIOLATION

On 7/18/2018 the home's current license was not posted in a conspicuous and public place in the home.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Administrator will place current license in a frame and post license in a visible area on the front of the home.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Cheryl Austin

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Cheryl Austin Administrator

Date *8/23/18*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of *09-07-18*
 (Date)

Plan of correction implementation status as of *8-29-18*
 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

The above plan of correction was approved by *SP*
 (Initials)

Violation Report: 14366 - 07/18/2018 - Gray, Dean
 PCH Name: JOHNSON S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600
 2600.18 - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

2a. DESCRIPTION OF VIOLATION
 The carbon monoxide detector's location is at the bottom of steps and more than 15 ft away from a fossil fuel burning appliance.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

On 08/01/18 two additional carbon monoxide detectors were installed in the designated area 15ft away from fuel appliances. The administrator will make sure carbon monoxide detectors are always placed within 15 feet of fossil fuel burning appliances.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Cheryl Austin

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Cheryl Austin Administrator

Date
 8/23/18

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The above plan of correction is approved as of 09-01-18
 (Date)

Plan of correction implementation status as of 8-29-18
 (Date)

The above plan of correction was approved by SP
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 14366 - 07/18/2018 - Gray, Dean
 PCH Name: JOHNSON S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600
 2600.85(e) - Trash outside the home shall be kept in covered receptacles that prevent the penetration of insects and rodents.

2a. DESCRIPTION OF VIOLATION

On 7/18/18, the trash can located in the home's yard was not covered.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

On 07/19/18 administrator removed all uncovered receptacles from the premises. Staff and residents were notified to use the covered dumpster that is provided by Banta trash removal company. Administrator and staff will ensure dumpster is being utilized and covered always.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
 (Required on EVERY Page) Cheryl Austin

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Cheryl Austin Administrator Date 8/23/18

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Violation Report: 14366 - 07/18/2018 - Gray, Dean
 PCH Name: JOHNSON S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600
 2600.88(a) - Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION
 The two lamps in room # E, on 7/18/18 were heavily soiled with dirt.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The heavily soiled dirt was cleaned from the lamps in room E on 07/18/18. The administrator has developed and implemented a cleaning schedule for staff members. Administrator will ensure staff stick to cleaning schedule so that home is clean, in good repair, and free of hazards.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Cheryl Austin*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Cheryl Austin</i>	Date <i>8/23/18</i>
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Violation Report: 14366 - 07/18/2018 - Gray, Dean
 PCH Name: JOHNSON S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600
 2600.103(c) - Food shall be protected from contamination while being stored, prepared, transported and served.

2a. DESCRIPTION OF VIOLATION
 On 7/18/18, 3 crates of onions, 6 bags of potatoes, 3 honey dew melon and 2 yellow squash were observed uncovered. A swarm of flies flying around the food.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

All mentioned produce was discarded on 07/18/18. Upon delivery all produce, and food items will be immediately stored in proper places by staff. New containers were purchased so food items can be stored and covered. Administrator will continue to monitor and ensure food is protected from contamination.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Cheryl Austin*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Cheryl Austin Administrator* Date *8/25/18*

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The above plan of correction is approved as of 09-07-18
 (Date)

Plan of correction implementation status as of 8-29-18
 (Date)

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 (Initials)

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Violation Report: 14366 - 07/18/2018 - Gray, Dean
 PCH Name: JOHNSON S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600
 2600.103(f) - Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

2a. DESCRIPTION OF VIOLATION
 on 7/18/2018 at 11:45 am, there was no thermometer in the freezer, located in the yard, next to the kitchen.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

On 8/19/18 a thermometer was placed in the freezer located on the back porch close to the yard. Staff and administrator will monitor to ensure thermometer will be kept in place in the freezer.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Cheryl Austin

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Cheryl Austin Administrator

Date *8/23/18*

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 (Date)

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 (Date)

The above plan of correction was approved by *SP*
 (Initials)

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Violation Report: 14366 - 07/18/2018 - Gray, Dean
 PCH Name: JOHNSON S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600
 2600.103(j) - Outdated or spoiled food or dented cans may not be used.

2a. DESCRIPTION OF VIOLATION

On 7/18/2018 at 12:00, 9 cans of whole peeled tomatoes with an expiration date of 2/28/17, 14 cans of corn with an expiration date of 5/23/17, 11 cans of green beans with an expiration date of 5/5/17, located in the kitchen pantry. Numerous cans of food, located in the basement had an expiration date of 8/4/2016.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

All outdated can items were discarded on 08/20/18 and replaced with food items that are not expired. The administrator has developed an inventory list to ensure food items do not stay in home beyond expiration dates. Staff will receive a refresher training on handling food items and food storage by 10/01/18. Training will be available for department review.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Cheryl Austin

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Cheryl Austin Administrator

Date *8/23/18*

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09-07-18
 (Date)

Plan of correction implementation status as of

08-29-18
 (Date)

Fully Implemented

Partially Implemented - Adequate Progress

Partially Implemented - Inadequate Progress

Not Implemented

The above plan of correction was approved by

SP
 (Initials)

Violation Report: 14366 - 07/18/2018 - Gray, Dean
 PCH Name: JOHNSON S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600
 2600.107(d) - The written emergency procedures shall be reviewed, updated and submitted annually to the local emergency management agency.

2a: DESCRIPTION OF VIOLATION
 The home's written emergency procedures have not been updated since 5/5/17.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The emergency procedures were reviewed, updated, and submitted to the local emergency management agency on January 3rd, 2018. We received confirmation on February 22nd, 2018. A copy is attached for department review.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Cheryl Aneth*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Cheryl Aneth Administrator* Date *8/23/18*

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 (Date)

The above plan of correction was approved by SP
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Violation Report: 14366 - 07/18/2018 - Gray, Dean
 PCH Name: JOHNSON S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600
 2600.132(f) - Alternate exit routes shall be used during fire drills.

2a. DESCRIPTION OF VIOLATION

All exits were used during the fire drills conducted on 11/13/17, 12/15/17, 1/24/18, 2/16/18, 3/16/18, 4/19/18, 5/8/18 and 6/29/18.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Administrator will implement using alternate exit routes for all fire drills. This will ensure we are better prepared in the event of a real fire drill. Residents and staff will continue to be educated on all the exits of the home and they will be utilized and alternated during fire drills.
 Administrator will document exit routes on department issued fire drill form.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Cheryl Austin*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Cheryl Austin Administrator* Date *8/23/18*

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 (Initials)

Plan of correction implementation status as of 08-29-18
 (Date)

- Fully Implemented
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- Partially Implemented - Inadequate Progress
- Not Implemented