



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

NOV 30 2018

Ms. Linda Mueller  
Owner / Administrator  
R. Lynn and Linda Muller  
208 River Forest Drive  
Freeport, Pennsylvania 16229

RE: Colonial Gardens Guest House  
121 Steppland Road  
Butler, Pennsylvania 16002  
Certificate #: 445700

Dear Ms. Mueller:

As a result of the Department's Bureau of Human Services Licensing annual inspection on October 2, 2018, of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed 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.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to [https://www.surveymonkey.com/r/BHSL\\_Inspection](https://www.surveymonkey.com/r/BHSL_Inspection).

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

Sincerely,

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary

**VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: COLONIAL GARDENS GUEST HOUSE		License Number: 44570
Address: 121 STEPPLAND ROAD, BUTLER, PA 16002		County: Butler
Administrator: KIMBERLY LEROY		Region: WEST
Legal Entity Name: R LYNN AND LINDA MUELLER		
Legal Entity Address: 208 RIVER FOREST DRIVE, FREEPORT, PA 16229		<b>RECEIVED</b>
Certificate(s) of Occupancy C-2 LP 12/18/1985 PA L&I		NOV 20 2018 WEST REGION FIELD OFFICE Human Services Licensing
<b>Staffing Hours</b>		
Resident Support: 0	Total Daily Staff: 29	Waking Staff: 22
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
<b>Reason(s) for Inspection(s)</b> Renewal		
<b>On-Site Inspections Dates and Department Representatives On-Site</b> 10/02/2018: Bartlett, Patricia; Kimberland, Jon; Klein, Scott		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b>		
<b>Other Details</b>		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 40 Number of Residents Served: 29 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 0 Number of Hospice Residents in past year: 1		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 23 Have Mental Illness: 29 Have an Intellectual Disability: 0 Have a Mobility Need: 0 Have a Physical Disability: 2

Violation Report: 44570 - 10/02/2018 - Bartlett, Patricia  
PCH Name: COLONIAL GARDENS GUEST HOUSE

WEST REGION FIELD OFFICE  
Human Services Licensing

**1. REGULATION 55 Pa.Code §2600**

2600.17 - Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

**2a. DESCRIPTION OF VIOLATION**

At approximately 10:40 a.m. in the nurse's station next to the kitchen/dining room a dry erase calendar measuring approximately 36 inches by 45 inches indicates resident first names and last initial for medical and dental appointments. Resident names included residents #1, #2, #3, and #4

The License Inspection Summary dated 10/6/17 and 10/17/17 includes the resident privacy coding including resident names including: Resident #5, #6, #7, and #8.

**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 residents records will be kept confidential and not be accessible except in emergencies by anyone other than the appropriate designated people, they are kept locked in the medroom/office area. The dry erase calendar will no longer have the appointments listed for the residents rather the residents first name and last initial will be on the calendar with times only. Thus the residents can prepare to leave on schedule. Since the administrative staff coordinates all appointments the actual appointment schedules and types of appointments will be kept in the medroom/office so questions asked by residents about the schedule can be answered.

Items cited in the violation were removed at the time of inspection. 11/21/18

Repeat Violation: No      Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page) *Kim M. Leroy*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Kim Leroy Administrator*      Date *11/19/18*

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

The above plan of correction is approved as of 11/21/18  
(Date)

Plan of correction implementation status as of 11/21/18  
(Date)

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

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

Violation Report: 44570 - 10/02/2018 - Bartlett, Patricia

PCH Name: COLONIAL GARDENS GUEST HOUSE

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.20(b)(1) - The home shall keep a record of financial transactions with the resident, including the dates, amounts of deposits, amounts of withdrawals and the current balance.

2a. DESCRIPTION OF VIOLATION

The home provides financial management services to resident #9. Resident #9's October 2018 financial documentation does not include a current balance after a cash disbursement of \$15.00 on 10/1/18.

The home provides financial management services to Resident #10. The resident's October 2018 record of financial transactions does not include the amount of withdrawals on 10/1/18 and 10/2/18 or a current balance.

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 home provides financial management services for some of the residents that are in need of assistance. The documentation will immediately include the current daily balances and the amount of the cash withdrawals. This will be done daily by the administrative staff.

The financial records for residents #9 and #10 were updated to include the required information. 11/21/18 *[Signature]*

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Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Kim Leroy ADMINISTRATOR*      Date *11/19/18*

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PCH Name: COLONIAL GARDENS GUEST HOUSE

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.20(b)(3) - The home shall obtain a written receipt from the resident for cash disbursements at the time of disbursement.

2a. DESCRIPTION OF VIOLATION

The home provides financial management services to resident #9. Resident 9's October 2018 financial documentation does not include a receipt for the resident for a cash disbursement of \$15.00 on 10/1/18.

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.*

The home shall obtain a written receipt (signature) for cash disbursements at time of disbursement. If the resident is unable to sign or has visual problems, such as resident #9 and therefore can't sign the administrative staff will either document the residents initials or write "cannot sign" when cash disbursements are given.

Resident signature was obtained for the transaction. 11/21/18 *[Signature]*

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Violation Report: 44570 - 10/02/2018 - Bartlett, Patricia

PCH Name: COLONIAL GARDENS GUEST HOUSE

WEST REGION FIELD OFFICE  
Human Services Licensing

**1. REGULATION 55 Pa.Code §2600**

2600.20(b)(8) - The home shall give the resident and the resident's designated person, an itemized account of financial transactions made on the resident's behalf on a quarterly basis.

**2a. DESCRIPTION OF VIOLATION**

The home provides financial management services for Resident #9. However, the home has not provided the resident and the designee a quarterly account of financial transactions on the resident's behalf.

The home provides financial management services for Resident #10. However, the home has not provided the resident and the designee with a quarterly account of financial transactions on the resident's behalf.

**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 home will give the resident and designated person an itemized quarterly accounting. This will be a copy of the daily financial record with the beginning and ending balances for the quarter on the face page quarterly sheet. Residents will sign the administrative copy upon receiving their copy. See attached.

Quarterly financial statements were provided for residents #9 ad #10. 11/21/18 *g*

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WEST REGION FIELD OFFICE  
 Human Services Licensing

**1. REGULATION 55 Pa.Code §2600**

2600.65(a) - Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following:

- (1) Evacuation procedures.
- (2) Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable.
- (3) The designated meeting place outside the building or within the fire-safe area in the event of an actual fire.
- (4) Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable.
- (5) The location and use of fire extinguishers.
- (6) Smoke detectors and fire alarms.
- (7) Telephone use and notification of emergency services.

**2a. DESCRIPTION OF VIOLATION**

Direct care staff person A started working in the home on 4/9/17. However, directstaff person A did not complete required training in accordance with 2600.65a until 4/17/17.

**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.*

All new direct care staff and any other ancillary staff will be trained prior to or on the first day of work to include all general fire and emergency preparedness that are include in 2600.65(a). This will be done by the administrative staff and documented.

Immediately: The administrator shall review all new staff records to ensure the required training in accordance with regulation 2600.65(a) is completed prior to or during the first day of work. 11/21/18 *g*

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WEST REGION FIELD OFFICE  
Human Services Licensing

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

At approximately 10:25 a.m., the white refrigerator in the dining room does not have a thermometer. There are approximately 8 one gallon containers of Kool-Aid and produce stored in the refrigerator.

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 refrigerators and freezers shall be stored at the temperature regulated by 2600.103(f). The maintenance personnel will check for the thermometers on a weekly basis in all freezers. The head cook will check the refrigerators on a weekly basis.

A thermometer was placed in the refrigerator. 11/21/18 *[Signature]*

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PCH Name: COLONIAL GARDENS GUEST HOUSE

WEST REGION FIELD OFFICE  
Human Services Licensing

**1. REGULATION 55 Pa.Code §2600**

2600.123(b) - Copies of the emergency procedures as specified in § 2600.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.

**2a. DESCRIPTION OF VIOLATION**

The emergency procedures for the home and the municipality are in a red binder that is locked in the medication room to the left of the nurse's station. The emergency procedures are not posted in a public and conspicuous location.

**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.*

Copies of the emergency procedures manual will be kept in a conspicuous place in the home. At the time of inspection there was a copy in the china closet in the main room in a white binder however this copy did not include the municipal emergency plan. The red binder which is kept in the medroom/office did include a copy of the municipals plan. The municipal's plan was copied and placed in the white binder and placed in the china closet which is accessible to all. The additional copy (in the red binder) is in the medroom/office.

Repeat Violation: No

Date(s) of Previous Violation(s):

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*Kim M. Leroy*

Printed Name and Title of Legal Entity Representative  
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*Kim Leroy ADMINISTRATOR*

Date

*11/19/18*

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(Initials)

Violation Report: 44570 - 10/02/2018 - Bartlett, Patricia  
 PCH Name: COLONIAL GARDENS GUEST HOUSE

NOV 20 2018

**1. REGULATION 55 Pa.Code §2600**

2600.123(c) - For a home serving nine or more residents, an emergency evacuation diagram of each floor showing corridors, line of travel to exit doors and location of the fire extinguishers and pull signals shall be posted in a conspicuous and public place on each floor.

WEST REGION FIELD OFFICE  
 Human Services Licensing

**2a. DESCRIPTION OF VIOLATION**

The emergency evacuation diagram posted at the medication station near the "candy sitting room" is not oriented to the correct evacuation route.

The emergency evacuation diagram posted at the nurse's station is not oriented to the correct evacuation route.

**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 home has posted emergency evacuation routes placed in all rooms and in conspicuous placed throughout the home that shows the line of travel both primary and secondary along with the placement of the fire extinguishers and pull boxes. The signs were immediately corrected to show the correct orientation of the evacuation routes. The maintenance personnel will check for the proper posting of the signs during their monthly home checks.

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Violation Report: 44570 - 10/02/2018 - Bartlett, Patricia

PCH Name: COLONIAL GARDENS GUEST HOUSE

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.132(g) - Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

2a. DESCRIPTION OF VIOLATION

The home schedules 2 staff persons during sleeping hours at all times. However, fire drill records on 7/19/18 at 3:45 a.m. and 1/23/18 at 6 a.m. both indicate 3 staff persons participating in the evacuation of residents these fire drills.

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 fire drills are held at different times of the day and different days of the week. There are 2 staff during sleeping hours. The fire drill on 7/19/18 only had 2 staff present. On 1/23/18 during the 6am fire drill there were three personnel. The daylight shift is 6am to 2:30pm. The daylight personnel was in the home at the time of the drill and did participate in evacuating the residents. The fire drills will continue to be held on different days and at different hours.

Immediately: Fire drills shall conducted using the scheduled staff to assist residents with evacuation. 11/21/18 *[Signature]*

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WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.221(c) - A current weekly activity calendar shall be posted in a conspicuous and public place in the home.

2a. DESCRIPTION OF VIOLATION

There is no activity calendar for the month of October, 2018. The only activity posted in the home was September 27 2018.

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.

A current weekly activity calendar shall be posted on the dry erase board calendar board. There are several posted monthly activity signs throughout the home with activities that are offered. Special activities are planned and scheduled the last of week previous month and the first week of each month then posted. Since our inspection was the 2<sup>nd</sup> of October, the activities had not been finalized as of yet. The administrative staff will coordinate and schedule these activities when the calendar is posted for the month. Additional activities will be added when they are scheduled.

Immediately: The administrator or designated staff person shall post a monthly activity calendar by the first day of the month. 11/21/18 *[Signature]*

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