



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

NOV 30 2018

Ms. Michele Butch  
Personal Care Manager  
Phoebe Home Incorporated  
1925 Turner Street  
Allentown, Pennsylvania 18104

RE: The David A. Miller Personal Care Community  
License #: 216170

Dear Ms. Butch:

As a result of the Department's Bureau of Human Services Licensing annual inspection on October 10, 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,

A handwritten signature in black ink that reads "Jacqueline L. Rowe".

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary



Violation Report: 21617 - 10/10/2018 - Deluca, Amy  
 PCH Name: THE DAVID A MILLER PERSONAL CARE COMMUNITY

**1. REGULATION 55 Pa.Code §2600**

2600.65(f) - Training topics for the annual training for direct care staff persons shall include the following:

- (1) Medication self-administration training.
- (2) Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
- (3) Care for residents with dementia and cognitive impairments.
- (4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
- (5) Personal care service needs of the resident.
- (6) Safe management techniques.
- (7) Care for residents with mental illness or mental retardation, or both, if the population is served in the home.

**2a. DESCRIPTION OF VIOLATION**

Staff person B and Staff person C did not have training in the required annual training topic Medication Self-administration.

**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.*

SEE ATTACHED....

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative <i>(Required on EVERY Page)</i>	<i>Michele Butch</i>
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Printed Name and Title of Legal Entity Representative <i>(Required on EVERY Page)</i>	Date
<i>Michele Butch PCHA</i>	<i>11/9/18</i>

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

The above plan of correction is approved as of <u>11-16-18</u> (Date)	Plan of correction implementation status as of <u>11-16-18</u> (Date)
The above plan of correction was approved by <u>MM</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

3A

Violation Report Personal Care Homes- 55 Pa. code chapter 2600

The David A. Miller Personal Care Community  
Administrator: Michele Butch

License number 216170

Regulation 2600.65 (f) Training topics for the annual training for direct care staff persons shall include the following:

- (1) Medication self-administration training.
- (2) Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
- (3) Care for residents with dementia and cognitive impairments.
- (4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
- (5) Personal care service needs of the resident.
- (6) Safe management techniques
- (7) Care for residents with mental illness or an intellectual disability, or both, if the population is served in the home.

Violation: Staff person B and staff person C did not have training in the required annual training topic Medication Self-administration.

Plan of Correction: Effective October 19, 2018 A new Medication: Self Administration training program and competency exam has been created and assigned to all direct care personal care employees by the Staff Development Department.

See attached PowerPoint titled: Medication Self-Administration

Employees will be required to complete the training and successfully complete the exam by November 22, 2018.

Compliance will be monitored by Staff Development for this immediate training and annually thereafter.

PCHA Signature: \_\_\_\_\_

*Michele Butch*

Date: \_\_\_\_\_

*11/9/18*

11-16-18

MM

**Violation Report:** 21617 - 10/10/2018 - Deluca, Amy  
**PCH Name:** THE DAVID A MILLER PERSONAL CARE COMMUNITY

**1. REGULATION 55 Pa.Code §2600**  
 2600.85(a) - Sanitary conditions shall be maintained.

**2a. DESCRIPTION OF VIOLATION**  
 The fourth floor kitchen's drinking water dispenser had heavy buildup of a blackish green stain that coated the dispensing tray area and was observed along the surface where the water exited the dispenser.

**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.*

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LFA

Violation Report Personal Care Homes- 55 Pa. code chapter 2600

The David A. Miller Personal Care Community  
Administrator: Michele Butch

License number 216170

Regulation 2600.85 Sanitary conditions shall be maintained.

Violation: The fourth floor kitchen's drinking water dispenser had heavy buildup of a blackish green stain that coated the dispensing tray area and was observed along the surface where the water exited the dispenser.

Plan of Correction: The ice and water machine will be cleaned (wiped down with sanitizer) during each meal service. Parts that can be run through the dish machine will be run through once daily at end of day. A read and sign has been completed with all Miller Dining Service Staff 10-10-2018 (see attached).

Effective October 10, 2018, the AM/PM Culinary Tech and Guest Service Representatives will be responsible daily to complete this task, the Supervisor is responsible for following up daily to ensure that the task has been completed. Verifying task completion has been added to the Daily Supervisor/Manager Checklist to monitor daily ongoing compliance.

PCHA Signature: Michele Butch Date: 11/9/18

11-16-18  
MM

Violation Report: 21617 - 10/10/2018 - Deluca, Amy  
 PCH Name: THE DAVID A MILLER PERSONAL CARE COMMUNITY

**1. REGULATION 55 Pa.Code §2600**  
 2600.85(d) - Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

**2a. DESCRIPTION OF VIOLATION**  
 An uncovered trash can was observed in the 4th floor dining area kitchen with food trash in it.

**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.*

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 (Required on EVERY Page) *Michele Butcher*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Michele Butcher PCHA</i>	Date <i>11/9/18</i>
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5A

Violation Report Personal Care Homes- 55 Pa. code chapter 2600

The David A. Miller Personal Care Community License number 216170  
Administrator: Michele Butch

Regulation 2600.85 Sanitary conditions shall be maintained.

Violation: An uncovered trash can was observed in the 4<sup>th</sup> floor dining area kitchen with food trash in it.

Plan of Correction: Trash can lid will remain on can at all-times. Lid will only be off during the time to scrape the plates. A read and sign has been completed with all Miller Dining Service Staff 10-10-2018 (see attached).

Effective October 10, 2018, the AM/PM Culinary Tech and Guest Service Representatives will be responsible daily to complete this task, the Supervisor is responsible for following up daily to ensure that the task has been completed. Verifying task completion has been added to the Daily Supervisor/Manager Checklist to monitor daily ongoing compliance.

PCHA Signature: Michele Butch Date: 11/9/18

11-19-18  
MM

Violation Report: 21617 - 10/10/2018 - Deluca, Amy  
 PCH Name: THE DAVID A MILLER PERSONAL CARE COMMUNITY

**1. REGULATION 55 Pa.Code §2600**  
 2600.109(b) - Cats and dogs present at the home shall have a current rabies vaccination. A current certificate of rabies vaccination from a licensed veterinarian shall be kept.

**2a. DESCRIPTION OF VIOLATION**  
 The current rabies vaccination for the cat, Ethel, living in the home expired on 10/6/2018.

**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.*

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Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Michele Butch PCHA</i>	Date <i>11/9/18</i>
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GA

Violation Report Personal Care Homes- 55 Pa. code chapter 2600

The David A. Miller Personal Care Community License number 216170  
Administrator: Michele Butch

Regulation 2600.109 Cats and dogs present at the home shall have a current rabies vaccination. A current certificate of rabies vaccination from a licensed veterinarian shall be kept.

Violation: The current rabies vaccination for the cat, Ethel, living in the home expired on 10/6/18.

Plan of Correction: The cat has been vaccinated as of October 12, 2018 (see attached). Next year, the cat will be vaccinated before October 12, 2019. The cat's annual vaccination date is marked on the administrator's work calendar as well as a reminder for September 12, 2019 (see attached) to call the family and remind them of the vaccination expiration. This will be reviewed annually for compliance.

PCHA Signature: Michele Butch Date: 11/9/18

11-16-18

MM

**Violation Report:** 21617 - 10/10/2018 - Deluca, Amy  
**PCH Name:** THE DAVID A MILLER PERSONAL CARE COMMUNITY

**1. REGULATION 55 Pa.Code §2600**  
 2600.132(h) - Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

**2a. DESCRIPTION OF VIOLATION**  
 The home's fire drill conducted on 1/25/2018 indicates that 1 resident did not evacuate during the fire drill due to a family member visiting and refusing to have the resident participate in the drill because the resident needed to use the bathroom.

**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.*

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Signature of Legal Entity Representative <i>Michele Buta</i>			
<b>(Required on EVERY Page)</b>			
Printed Name and Title of Legal Entity Representative <i>Michele Buta PCHA</i>		Date	<i>11/2/18</i>
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7A

Violation Report Personal Care Homes- 55 Pa. code chapter 2600

The David A. Miller Personal Care Community  
Administrator: Michele Butch

License number 216170

Regulation 2600.132 Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

Violation: The home's fire drill conducted on 1/25/2018 indicates that 1 resident did not evacuate during the fire drill due to a family member visiting and refusing to have the resident participate in the drill because the resident needed to go to the bathroom.

Plan of Correction: I would like this violation to be revoked due to the supporting documentation that the issue was address with the resident and family member during and immediately following the drill. It is noted in the fire drill report and says: "During and following the fire drill staff re-educated the granddaughter who would not allow her grandfather to participate in the drill of the importance & necessity for every resident's participation, so everyone is well prepared in case of a real fire or emergency." The DHS form (see attached) asks if there were any issues and it was reported honestly that there was an issue with this drill, the next box asked for a plan of correction for these issues and this issue was corrected immediately, therefore, I believe this violation should be revoked.

\*\*\*\*\* As a plan of correction and to ensure all residents and families understand the importance of complying with this regulation a letter (See attached) was sent out November 8, 2018 to all residents' family members explaining the importance of fire drills and the necessity of all residents to participate in fire drills. The Personal Care Home Administrator will also explain the importance of participating in fire drills to residents at the next Resident Council meeting November 29, 2018.

Ongoing compliance will be monitored as part of the monthly fire drill.

11-16-18  
MM

PCHA Signature: Michele Butch Date: 11/9/18

Violation Report: 21617 - 10/10/2018 - Deluca, Amy  
 PCH Name: THE DAVID A MILLER PERSONAL CARE COMMUNITY

1. REGULATION 55 Pa.Code §2600  
 2600.141(a)(2) - The medical evaluation must include the following: (1) through (10)

2a. DESCRIPTION OF VIOLATION  
 Resident #1's Documentation of Medical Evaluation (DME) form dated 10/01/18 did not indicate if the resident was able to self-administer medications.  
 Resident #2's DME dated 05/07/18 section #6 was left blank and did not address his/her immunization history.

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.

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SA

Violation Report Personal Care Homes- 55 Pa. code chapter 2600

The David A. Miller Personal Care Community  
Administrator: Michele Butch

License number 216170

Regulation 2600.141(a)(2) The medical evaluation must include the following: (1) through (10)

Violation: Resident #1's DME form dated 10/1/18 did not indicate if the resident was able to self-administer medications.

Resident #2's DME dated 5/7/18 section #6 was left blank and did not address his/her immunization history.

Plan of Correction: A read and sign (see attached) was presented to the charge nurse, social worker and Administrator, to further educate them on the required regulation of completely filling out residents' medical information. Education included (see attached) what to do if a form is left blank or there is incorrect information recorded by the resident's medical practitioner.

Starting November 12, 2018 the Administrator will be conducting audits on 10% of the resident census to ensure adherence to these policies. Non-adherence could result in disciplinary actions. The findings will be recorded on the Monthly Audit Spreadsheet.

All current DME's were reviewed for omitted or incorrect information and have since been corrected, please see attached corrected DME's that were found not in compliance.

11-16-18

MM

PCHA Signature: Michele Butch Date: 11/9/18

Violation Report: 21617 - 10/10/2018 - Deluca, Amy  
PCH Name: THE DAVID A MILLER PERSONAL CARE COMMUNITY

**1. REGULATION 55 Pa.Code §2600**

2600.171(b)(5) - If staff persons or volunteers of the home provide transportation for the residents, the vehicle must have a first aid kit with the contents in § 2600.96 (relating to first aid kit).

**2a. DESCRIPTION OF VIOLATION**

The facility's vehicle first aid kit did not contain a thermometer

**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.*

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Signature of Legal Entity Representative  
(Required on EVERY Page)

*Michele Butch*

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

*Michele Butch*

Date

*11/9/18*

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(Date)

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

Plan of correction implementation status as of 11-16-18  
(Date)

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

9A

Violation Report Personal Care Homes- 55 Pa. code chapter 2600

The David A. Miller Personal Care Community  
Administrator: Michele Butch

License number 216170

Regulation 2600.171(b)(5) If staff persons or volunteers of the home provide transportation for the residents, the vehicle must have a first aid kit with the contents in 2600.96 (relating to first aid kit).

Violation: The facility's vehicle first aid kit did not contain a thermometer.

Plan of Correction: One time use thermometers were put in the first aid kit in the vehicle October 11, 2018. All items in the first aid kit will be inventoried in alphabetical order. There will be a par level for every item in the kit, and expiration dates will be noted for every item.

Effective November 12, 2018, on the first Monday of the month, the Environmental Services Administrative Assistant or their designee will audit the first aid kit by taking an inventory of all items in the kit using the First Aid Kit Contents Monthly Audit Sheet (see attached). Any expired or missing items will be ordered from occupational health. Any expired item will be removed and new items will replace the expired items.

A new list will be created for the month. The list will be signed by the person auditing the items and be placed back in the truck once completed.

11-16-18

MM

PCHA Signature: \_\_\_\_\_

*Michele Butch*

Date: \_\_\_\_\_

*11/9/18*

Violation Report: 21617 - 10/10/2018 - Deluca, Amy  
 PCH Name: THE DAVID A MILLER PERSONAL CARE COMMUNITY

**1. REGULATION 55 Pa.Code §2600**  
 2600.183(b) - Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

**2a. DESCRIPTION OF VIOLATION**  
 Resident #3's room was found to have 1 jar of Vick's medicated rub and a package of Monistat Treatment. This resident was not assessed to be able to self-administer medications.

**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.

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- Partially Implemented - Inadequate Progress
- Not Implemented

10A

Violation Report Personal Care Homes- 55 Pa. code chapter 2600

The David A. Miller Personal Care Community License number 216170  
Administrator: Michele Butch

Regulation 2600.183 Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

Violation: Resident #3's room was found to have 1 jar of Vick's medicated rub and a package of Monistat Treatment. The resident was not assessed to be able to self-administer medications.

Plan of Correction: All residents have a locked medicine cabinet in their room to secure any medications either OTC, CAM or prescriptions that are not kept on the medication carts. Education on this regulation has been provided to residents at the October 25, 2018 Resident Council meeting, see attached **council meeting minutes**. A family letter, **see attached**, was sent out November 8, 2018 to education families on this regulation and to direct them to the Nurse or Med Tech when bringing in new medications for residents.

In addition, a **read and sign** was presented to the staff, to further educate them on the required regulation of only keeping current prescription, OTC, sample, and CAM in the medication cart and disposing of the expired orders. (See attached). All staff will complete the read and sign by November 30, 2018.

Starting November 12, 2018 the Administrator will be conducting audits on 10% of the resident census to ensure adherence to these policies. Non-adherence could result in disciplinary actions.

11-16-18

MM

PCHA Signature: Michele Butch Date: 11 | 9 | 18

Violation Report: 21617 - 10/10/2018 - Deluca, Amy  
 PCH Name: THE DAVID A MILLER PERSONAL CARE COMMUNITY

1. REGULATION 55 Pa.Code §2600  
 2600.183(d) - Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home

2a. DESCRIPTION OF VIOLATION  
 Resident #4 had a blister pack labeled for Mucinex 600mg 1 tablet to be taken for 10 days beginning 7/24/2018. The medication was still available for use in the medication cart on the day of this inspection.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)  
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11A

Violation Report Personal Care Homes- 55 Pa. code chapter 2600

The David A. Miller Personal Care Community  
Administrator: Michele Butch

License number 216170

Regulation 2600.183 Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Violation: A resident's order for Mucinex ended but was still in the medication cart.

Plan of Correction: The Mucinex was immediately removed from the medication cart.

A read and sign was presented to the staff, to further educate them on the required regulation of only keeping current prescription, OTC, sample, and CAM in the medication cart and disposing of the expired orders. (See attached). All staff will complete the read and sign by November 30, 2018.

Starting November 12, 2018 the Administrator will be conducting audits on 10% of the resident census to ensure adherence to these policies. Non-adherence could result in disciplinary actions

11-16-18

MM

PCHA Signature: Michele Butch Date: 11/9/18

Violation Report: 21617 - 10/10/2018 - Deluca, Amy  
 PCH Name: THE DAVID A MILLER PERSONAL CARE COMMUNITY

**1. REGULATION 55 Pa.Code §2600**  
 2600.185(a) - The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

**2a. DESCRIPTION OF VIOLATION**  
 Resident #5's Glucometer was not calibrated to the correct date and time. The resident's glucometer memory contained only 2 blood glucose readings, however the home's Medication Administration Record (MAR) documented that the resident's blood glucose levels were being tested daily.

**3. PLAN OF CORRECTION (POC)** (Attach pages as necessary. Remember that you must sign and date any attached pages.)  
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12A

Violation Report Personal Care Homes- 55 Pa. code chapter 2600

The David A. Miller Personal Care Community  
Administrator: Michele Butch

License number 216170

Regulation 2600.185 The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Violation: One glucometer was not calibrated properly for one resident. The date on the glucometer was incorrect.

Plan of Correction: A read and sign was presented to the staff, to further educate them on the required regulation of correctly calibrating medical equipment and devices (see attached). The instructions for properly calibrating new Glucometers will also be placed in each Medication Cart Book in the Glucometer Testing Section for easy reference. The Personal Care Home Manager or designee will also educate staff on how to set the date on the glucometer and the importance of setting the proper date. All staff will complete the read and sign by November 30, 2018.

Starting November 12, 2018 the Administrator will be conducting audits on 10% of the resident census to ensure adherence to these policies. Non-adherence could result in disciplinary actions

11-16-18

MM

PCHA Signature: Michele Butch Date: 11/9/18

Violation Report: 21617 - 10/10/2018 - Deluca, Amy  
 PCH Name: THE DAVID A MILLER PERSONAL CARE COMMUNITY

**1. REGULATION 55 Pa.Code §2600**  
 2600.252 - Each resident's record must include the following information: (1) through (26)

**2a. DESCRIPTION OF VIOLATION**  
 Resident records for residents #1 and #6 did not indicate if the residents have identifiable marks.

**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.*

SEE ATTACHED.....

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

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Michele Buta* Date *11/9/18*

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

The above plan of correction is approved as of <u>11-16-18</u> (Date)  The above plan of correction was approved by <u>MM</u> (Initials)	Plan of correction implementation status as of <u>11-16-18</u> (Date) <input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented
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BA

Violation Report Personal Care Homes- 55 Pa. code chapter 2600

The David A. Miller Personal Care Community  
Administrator: Michele Butch

License number 216170

Regulation 2600.252 Each resident's record must include the following information: (1) through (26)

Violation: Resident records for residents #1 and #6 did not indicate if the residents have identifiable marks.

Plan of Correction: A read and sign (see attached) was presented to the charge nurse, social worker and Administrator, to further educate them on the required regulation of completely filling out residents' medical information.

Starting November 12, 2018 the Administrator will be conducting audits on 10% of the resident census to ensure adherence to these policies. Non-adherence could result in disciplinary actions. The findings will be recorded on the Monthly Audit Spreadsheet.

All current Medical Records were reviewed for omitted information and have since been corrected, please see attached corrected records that were found not in compliance.

11-16-18

MM

PCHA Signature:

Michele Butch

Date:

11/16/18