



MAILING DATE: February 15, 2019

Ms. Jean McVey
Administrator
Jean McVey
235 North Gallatin Avenue
Uniontown, Pennsylvania 15401

RE: McVey Personal Care Home
License #: 460240

Dear Ms. McVey:

As a result of the Department's Bureau of Human Services Licensing inspection on November 8, 2018, of the above facility, the citations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read "Jason Williams". The signature is fluid and cursive.

Jason Williams
Human Services Licensing Supervisor

Enclosure
Violation Report

Violation Report: 46024 - 11/08/2018 - Graziano, Belinda
PCH Name: MCVEY PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600
 2600.127(a) - Portable space heaters are prohibited.

2a. DESCRIPTION OF VIOLATION
 At 9:10 a.m., a portable space heater was in use in Resident #1's bedroom approximately 2 feet from the head of the bed.

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.

Space heaters are prohibited in the home no matter if you purchased them on your own or not and by no means are they allowed to be used in bedrooms or anywhere else in the home due to fire hazards. Anyone getting caught using a space heater is subjected to a 30 day notice. No exceptions. This is for safety of everyone else in the house. --- Residents were educated on this policy on 11/8/18. JW 2/1/19

The space heater was removed on the day of inspection. JW 2/1/19
 Immediately: A designated staff person will check the home daily to ensure no portable space heaters are in use. JW 2/1/19

Repeat Violation: No **Date(s) of Previous Violation(s):** [] [] []

Signature of Legal Entity Representative
 (Required on EVERY Page) *Jean Muey*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Jean Muey Administrator* **Date** *1/20/19*

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

The above plan of correction is approved as of <u>2/1/19</u> (Date)	Plan of correction implementation status as of <u>2/1/19</u> (Date)
The above plan of correction was approved by <u>JW</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>JW</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 46024 - 11/08/2018 - Graziano, Beinda

PCH Name: MCVEY PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.144(c) - A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures that include 2600.144(c)1-3.

2a. DESCRIPTION OF VIOLATION

At 9:10 a.m., an ashtray full of ashes and a cigarette butt were on the bedside table of resident #1. Resident and staff interviews indicate that resident #1 occasionally smokes in his/her bedroom.

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.

Made a new fire safety policy and procedures and having all residents that smoke sign a smoking policy.

Immediately: A designated staff person will check the home daily to ensure that residents and staff are following the written fire safety policy and procedures, including smoking only in designated smoking areas. *JW* 2/1/19

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Jean Mcvey

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

Jean Mcvey ADMINISTRATOR

Date 1/20/19

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The above plan of correction is approved as of 2/1/19
(Date)

Plan of correction implementation status as of 2/1/19
(Date)

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

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