



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via fax
January 18, 2019

Mr. Alex Mains, Administrator
Penn Assisted Care, LLC
68 Main Street
Pennsburg, Pennsylvania 18073

RE: Penn Assisted Care
License #: 139050

Dear Mr. Mains:

As a result of the Department's Bureau of Human Services Licensing inspection on December 10, 2018 of the above facility, the violations 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.

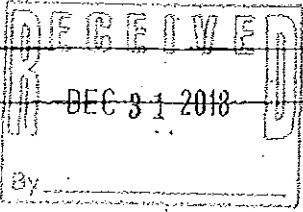
Sincerely,

A handwritten signature in cursive script that reads "Mia Johnson".

Mia Johnson
Human Services Licensing Supervisor

Enclosure
Violation Report

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

PCH Name: PENN ASSISTED CARE		License Number: 13905
Address: 68 MAIN STREET, PENNSBURG, PA 18073		County: Montgomery
Administrator: Alex Mains		Region: SOUTHEAST
Legal Entity Name: PENN ASSISTED CARE LLC		
Legal Entity Address: 68 MAIN STREET, PENNSBURG, PA 18073		
Certificate(s) of Occupancy I-1 12/17/2008 Borough of Pennsburg		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 32	Working Staff: 24
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Complaint		
On-Site Inspections Dates and Department Representatives On-Site 12/10/2018: Thomas, Tahesia		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 33	Number of Residents who:	
Number of Residents Served: 32	Receive Supplemental Security Income: 1	
Secured Dementia Care Unit in Home: No	Are 60-Years of Age or Older: 18	
Area:	Have Mental Illness: 21	
Secured Dementia Unit Capacity, if Applicable:	Have an Intellectual Disability: 1	
Number of Residents Served in Secured Dementia Care Unit, if applicable:	Have a Mobility Need: 0	
Number of Current Hospice Residents: 0	Have a Physical Disability: 0	
Number of Hospice Residents in past year: 1		

Violation Report: 13905 - 12/10/2018 - Thomas, Tahesia	
PCH Name: PENN ASSISTED CARE	
<p>1. REGULATION 65 Pa.Code §2600 2600.25(c)(2) - The contract shall specify a fee schedule that lists the actual amount of allowable resident charges for each of the home's available services</p>	
<p>2a. DESCRIPTION OF VIOLATION The home's contract does not include a specific fee schedule of actual amounts charged for available services.</p>	
<p>3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.) <i>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</i></p> <p>Effective immediately Penn Assisted Care has updated the fee schedule to more accurately reflect the rates and charges. The Administrator was provided with additional training on the guest contract relating to rates and charges. In order to assure ongoing compliance with this regulation the Administrator will explain the rates and charges to new Residents during intake process and give new Residents the opportunity to ask questions to assure knowledge of their rates and charges. In addition, all current Residents will be given a 30 day notice of these changes and will be given the opportunity to ask questions on an individual basis relating to their rates and charges.</p>	
Repeat Violation: No	Date(s) of Previous Violation(s):
Signature of Legal Entity Representative (Required on EVERY Page)	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Alex Mains, Administrator</i>	
Date <i>12/31/18</i>	
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!	
The above plan of correction is approved as of <u>1/17/19</u> (Date)	Plan of correction implementation status as of _____ (Date)
The above plan of correction was approved by <i>[Signature]</i> (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

Violation Report: 13905 - 12/10/2018 - Thomas, Tahesia PCH Name: PENN ASSISTED CARE	
1. REGULATION 55 Pa.Code §2600 2600.103(i) - Outdated or spoiled food or dented cans may not be used.	
2a. DESCRIPTION OF VIOLATION On 12/10/18, the home had a 6 pound can of sliced peaches and a 6 pound can of diced tomatoes that were dented in the pantry.	
3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.) <i>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.</i>	
<p>Effective immediately all dented cans have been removed from the pantry. All dietary staff have been trained on identifying and removing dented cans. In order to assure ongoing compliance with this regulation dietary staff will remove any dented cans received from vendors before being stored in the pantry. In addition, Penn Assisted Care will be switching to a new vendor who's policy is to check for and remove dented cans before delivery. Furthermore, the Head of Dietary will review all cans in the pantry once a week for a period of six months to assure that no dented cans are present.</p> <p>Maintain documentation for department review for a period of three years. MJ-1/17/19</p>	
Repeat Violation: No	Date(s) of Previous Violation(s):
Signature of Legal Entity Representative (Required on EVERY Page) <i>Alex Maix</i>	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Alex Maix, Administrator</i>	Date <i>12/31/18</i>
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!	
The above plan of correction is approved as of <u>1/17/19</u> (Date)	Plan of correction implementation status as of _____ (Date)
The above plan of correction was approved by <u><i>MJ</i></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

Violation Report: 13905 - 12/10/2018 - Thomas, Tatesia
PCH Name: PENN ASSISTED CARE

1. REGULATION 55 Pa.Code §2600
2600.161(a) - Meals shall be offered that meet the recommended dietary allowances established by the United States Department of Agriculture.

2a. DESCRIPTION OF VIOLATION

The meals served by the home do not include an item from each of the five food groups; fruits, grains, vegetables, protein and dairy.

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.

Effective immediately Penn Assisted Care has updated the menu to better reflect the United States Department of Agriculture's guidelines regarding portions and daily food group requirements. The United States Department of Agriculture's guidelines relating to the five food groups and portions are a daily requirement and do not require that any particular food group be met during each of the meals as long as all of the required daily portions of each of the five food groups are met. All dietary staff have been provided training on the United States Department of Agriculture's MyPlate and the five food groups. In order to assure ongoing compliance with this regulation the Administrator will monitor food services weekly for a period of six months and interview Residents to assure that each of the food groups were available to them during regularly scheduled food services.

Maintain documentation for department review for a period of three years. MJ-1/17/19

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Alex Mains*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Alex Mains, Administrator* Date *12/31/18*

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

The above plan of correction is approved as of 1/17/19
(Date)

Plan of correction implementation status as of _____
(Date)

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

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

Violation Report: 13905 - 12/10/2018 - Thomas, Tahesia
PCH Name: PENN ASSISTED CARE

1. REGULATION 56 Pa.Code §2600
2600.161(b) - At least three nutritionally well-balanced meals shall be offered daily to the resident. Each meal shall include an alternative food and drink item from which the resident may choose.

2a. DESCRIPTION OF VIOLATION
The meals served by the home do not include an item from each of the five food groups: fruits, grains, vegetables, protein and dairy.

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.

Effective immediately Penn Assisted Care has updated the recipes to better reflect the United States Department of Agriculture's guidelines regarding portions and daily food group requirements. The United States Department of Agriculture's guidelines relating to the five food groups and portions are a daily requirement and do not require that any particular food group be met during each of the meals as long as all of the required daily portions of each of the five food groups are met. All dietary staff have been provided training on the new recipes and menus. In order to assure ongoing compliance with this regulation the Administrator will monitor food services weekly for a period of six months and interview dietary staff to assure that the proper portions of the food groups were available to them during regularly scheduled food services.

Maintain documentation for department review for a period of three years. MJ-1/17/19

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Alex Macon*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Alex Macon, Administrator* Date *12/31/18*

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