



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JAN 25 2019

Mr. Richard Tickner
Board President
Broad Acres Nursing Home Association
1883 Shumway Hill Road
Wellsboro, Pennsylvania 16901

RE: Country Terrace
1919 Shumway Hill Road
Wellsboro, Pennsylvania 16901
License: 235010

Dear Mr. Tickner:

As a result of the Department's Bureau of Human Services Licensing annual inspection on December 20, 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.

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.

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, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
Violation Report

Violation Report: 23501 - 12/20/2018 -
 PCH Name: COUNTRY TERRACE

1. REGULATION 55 Pa.Code §2600

2600.124 - The home shall notify the local fire department in writing of the address of the home, location of the bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.

2a. DESCRIPTION OF VIOLATION

The home's current notice to the fire department, dated 12/14/16, does not include the total licensed capacity of the home. It also states that the home serves 1 immobile resident; at the time of inspection, the home did not serve any immobile residents.

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 letter to The Fire department was updated and sent to them on day of inspection 12/20/2018. - see attached

On 1/8/2019 all staff were made aware of letter.

Will review quarterly at Quality Management meetings and update as needed.

The administrator will be responsible for ongoing compliance.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Deborah Hazeton

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

Deborah Hazeton

Date

1/11/19

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

The above plan of correction is approved as of 1-11-19
 (Date)

Plan of correction implementation status as of 1-11-19
 (Date)

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

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