



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail: [REDACTED]
Mailing Date: February 26, 2019

Ms. Donna Strittmatter
President, NHA
Smith Health Care LTD
453 South Main Road
Mountain Top, Pennsylvania 18707

RE: Smith Health Care LTD
License #229230

Dear Ms. Strittmatter:

As a result of the Department's Bureau of Human Services Licensing inspection on January 11, 2019 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 "M. Moskalczyk".

Michele Moskalczyk
Human Services Licensing Supervisor

Enclosure
Violation Report

Violation Report: 22923 - 01/11/2019 - O'Haire, Anne
 PCH Name: SMITH HEALTH CARE LTD

1. REGULATION 55 Pa.Code §2600
 144(c)(2) Location of a smoking room or outside smoking area a safe distance from heat sources, hot water heaters, combustible or flammable materials and away from common walkways and exits.

2a. DESCRIPTION OF VIOLATION

The home had evidence of smoking outside the designated smoking area as approximately 30 cigarette butts was observed on the ground in the parking lot near the main entrance of the personal care home on the date of inspection.

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.

There is an appropriate outdoor smoking area in compliance with reg 144 (c), however cigarette butts were found on the ground. All staff were inserviced on smoking policy on 2/20/2019. All current residents that smoke were re-educated on smoking policies by 2\1\2019. Maintenance staff cleaned outside ground by 1\28\2019 and a weekly walk around weather permitting by maintenance is being done and submitted to PCHA and QA quarterly for review.

The administrator shall monitor and be responsible for on-going compliance. 3-11-19

MM

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Tammy Preston, PCHA

Date 3/8/2019

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

The above plan of correction is approved as of 3-11-19
 (Date)

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

Plan of correction implementation status as of 3-11-19
 (Date)

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