



pennsylvania
DEPARTMENT OF HUMAN SERVICES

APR 05 2019

Ms. Nanette Johnson
Owner/Administrator
222 Salisbury Street
Meyersdale, Pennsylvania 15552

RE: Johnson's Personal Care Home
Certificate #: 321370

Dear Ms. Johnson:

As a result of the Department's Bureau of Human Services Licensing's annual licensing inspection on March 5, 2019 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 that reads "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
Violation Report

Violation Report: 32137 - 3/5/2019 - Heemer, Laura

PCH Name: JOHNSON S PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.42(o) - A resident has the right to freely associate, organize and communicate with others privately.

2a. DESCRIPTION OF VIOLATION

The Home's Rules, revised March 2017, state there are to be "No relationships among Residents, friendships only". This rule limits the residents' ability to freely associate, organize, and communicate with others in private.

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.

After discussing this with Brett, I removed this from the house rules. We will handle each case differently if it would arise; With educating the residents, charting in files, discussing a situation with family, doctors, and case managers along with the residents. Please see the attached revised house rules.

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

Signature of Legal Entity Representative (Required on EVERY Page) *Nanette Johnson*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Nanette Johnson* Date *3-18-19*

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

The above plan of correction is approved as of <u>3/22/19</u> (Date)	Plan of correction implementation status as of <u>3/22/19</u> (Date)
The above plan of correction was approved by <u>BAS</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

1. REGULATION 55 Pa.Code §2600

2600.42(r) - A resident has the right to receive visitors for a minimum of 12 hours daily, 7 days per week.

2a. DESCRIPTION OF VIOLATION

The Home's Rules, revised March of 2017, state visiting hours are from 9 am until 8 pm, providing less than 12 hours of visiting time.

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 Personal Care Home's house rules have been revised to state visiting hours are from 9 AM - 9:00 PM and signs have been hung up on bulletin boards to let visitors aware of the visiting hours. Please see the revised house rules.

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

Signature of Legal Entity Representative (Required on EVERY Page) *Nanette Johnson*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Nanette Johnson* Date *3-18-19*

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

The above plan of correction is approved as of 3/22/19 (Date)

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

Plan of correction implementation status as of 3/22/19 (Date)

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

1. REGULATION 55 Pa.Code §2600

2600.42(s) - A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.

2a. DESCRIPTION OF VIOLATION

The bathroom next to resident bedroom #3, the bathroom between resident bedrooms #9 and #10, and the bathroom directly across from resident bedroom #9 do not have latches or locks to ensure privacy for the residents while using 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.

- Our maintenance contractor will be installing new door knobs with locks on all three of the bathroom doors, this project will be done by March 22, 2019.

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

Signature of Legal Entity Representative (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Nanette Johnson* Date *3-18-19*

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

The above plan of correction is approved as of 3/22/19 (Date)

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

Plan of correction implementation status as of 3/22/19 (Date)

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

1. REGULATION 55 Pa.Code §2600

2600.132(d) - Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.

2a. DESCRIPTION OF VIOLATION

The home's designated evacuation time is 2 minutes and 30 seconds. The fire drill conducted on 12/20/2018 took 2 minutes and 42 seconds.

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.

1. Had a meeting with all residents present on the importance of getting out of the Personal Care Home as fast as you can, even if it is just a practice drill because you never know when it may be a real fire. We discussed the timing as well, if need be we can do several practice drills ~~to~~ everyone is comfortable with taking this seriously.

2. I discussed with them the importance of fire drills and safety.

* In the event that an evacuation takes longer than the designated time, the administrator will investigate the cause, implement steps to address the cause, and hold another drill to ensure that the remedy was successful.

BAS 3/22/19

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)

Nanette Johnson

Date: 3-19-19

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

The above plan of correction is approved as of 3/22/19
(Date)

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

Plan of correction implementation status as of 3/22/19
(Date)

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

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

The home permits smoking by staff directly outside Exit A, which is the main entrance to the home and leads to a common hallway. Due to the proximity of the home, second hand smoke enters the home as soon as the door opens.

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.

1. Resident Education - discussed the importance of not smoking by the main entrance, the reason the metal chairs are moved by the staff to the lower end of the building is to keep the smoke from others and entering the building.
2. Staff checks regularly to make sure chairs are not being moved by residents.
3. Remind residents regularly about where they are allowed to smoke. (only have three residents that smoke)
4. Post smoking sign at smoking location

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)

Date 3-20-19

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

The above plan of correction is approved as of 3/22/19
(Date)

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

Plan of correction implementation status as of 3/22/19
(Date)

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