



July 11, 2019

Ms. Elizabeth Koster
Chief Executive Officer
Fitzmaurice Community Services Inc.
2115 North Fifth Street
Stroudsburg, Pennsylvania 18360

RE: Fitzmaurice Community Services, Inc.
5 Elm Street
Stroudsburg, Pennsylvania 18360
License #: 209540

Dear Ms. Koster:

As a result of the Department's Bureau of Human Services Licensing annual inspection on March 14, 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: 20954 - 03/14/2019 - Harvey, Jason
 PCH Name: FITZMAURICE COMMUNITY SERVICES INC

1. REGULATION 55 Pa.Code §2600

2600.224(a) - A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

2a. DESCRIPTION OF VIOLATION

The preadmission screening in the record of resident #1 (dated 1/7/19) did not indicate if the needs of the resident can be met by the services of the home.

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. The preadmission screening for Resident #1 was corrected immediately on 3/14/19. The box was checked "Yes" indicating that the resident's needs could be met by the services of the home.
2. The Administrator will thoroughly check all preadmission screenings for accuracy and completion in the future.
3. The Administrator will assure ongoing compliance.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Debra Scoozza, C.O.D.

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

Debra Scoozza, C.O.D.

Date

4/23/19

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

The above plan of correction is approved as of 6-7-19
 (Date)

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

Plan of correction implementation status as of 6-7-19
 (Date)

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