



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: cmc_mdsinc@yahoo.com
MAILING DATE: August 8, 2019

Ms. Sandra L. Tristan
Director
Milton Developmental Services Inc.
60 Walnut Street, PO Box 416
Milton, Pennsylvania 17847

RE: Milton Developmental Services II
License #: 202151

Dear Ms. Tristan:

As a result of the Department's Bureau of Human Services Licensing inspection on May 8, 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 that reads "Anne Graziano".

Anne Graziano
Human Services Licensing Supervisor

Enclosure
Violation Report

Violation Report

Facility Information

Name: MILTON DEVELOPMENTAL SERVICES II
Address: 60 WALNUT STREET P O BOX 416, MILTON, PA 17847
County: NORTHUMBERLAND **Region:** NORTHEAST

License Number: 202150

Administrator

Name: Cynthia Catherman **Phone:** 5707429849 **Email:** CMC MDSINC@YAHOO.COM

Legal Entity

Name: MILTON DEVELOPMENTAL SERVICES INC
Address: 60 WALNUT ST, PO BOX 416, PA, 17847

Certificate(s) of Occupancy

Type: Other **Date:** **Issued By:**

Staffing Hours

Resident Support Staff: **Total Daily Staff:** 19 **Waking Staff:** 14

Inspection

Type: Partial **BHA Docket #:** **Notice:** Unannounced
Reason: Monitoring, POC Verification

Inspection Dates and Department Representative

05/08/2019 - On-Site: Gerald Dumas, Jason Harvey

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 24 **Residents Served:** 19

Secured Dementia Care Unit

In Home: No **Area:** **Capacity:** **Residents Served:**

Hospice

Current Residents: 19

Number of Residents Who:

Receive Supplemental Security Income: 10 **Are 60 Years of Age or Older:** 9
Diagnosed with Mental Illness: 5 **Diagnosed with Intellectual Disability:** 18
Have Mobility Need: 0 **Have Physical Disability:** 0

MILTON DEVELOPMENTAL SERVICES II

202150

16c - Written Incident Report

Regulations

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On 4/14/19 in the late afternoon, while resident # 1 was sitting outside with friends in the smoking area, a person from the community who was visiting resident # 1 put their hands on resident # 1's shirt in the area of her breasts. Resident # 1 told the visitor to stop and the visitor complied. The home did not notify the Department or Protective Services within 24 hours of the incident. The incident was sent late to this Department on 4/16/19.

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.)

All incidents or conditions will be reported to the department's Regional office within 24 hr in the MANNER designated by the Department. Abuse Reporting shall also follow the guidelines in 2600.15

On 5/28/19, [redacted] conducted A training outlining reporting mandates to our staff. (Two staff who were unable to attend at that time received the handouts with information reviewed by the Adm. of MDS on 6/4/19)

The Administrator is ultimately responsible for timely reporting of incidents and conditions. All staff persons are aware of and have now received training of the requirements AS Mandated. Verification of training Attached.

Legal Entity Representative


Signature

Cynthia M Coltrano
Printed Name and Title

7/29/19
Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 7-30-19
(Date)

Plan of correction implementation status as of 7-30-19
(Date)

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

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