pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: minelli09@hotmail.com
MAILING DATE: October 24, 2019

Mr. Frank Minelli
Administrator/Owner
Angel's Family Manor Personal Care Home Inc.
218 North Main Avenue
Scranton, Pennsylvania 18504

RE: Angel's Family Manor Personal Care Home
License #: 210620

Dear Mr. Minelli:

As a result of the Department's Bureau of Human Services Licensing inspection on June 18, 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,

Anne Graziano
Human Services Licensing Supervisor

Enclosure
Violation Report

Violation Report

Facility Information

Name: *ANGEL'S FAMILY MANOR PERSONAL CARE HOME* **License Number:** *21062*
Address: *218 NORTH MAIN AVENUE, SCRANTON, PA 18504*
County: *LACKAWANNA* **Region:** *NORTHEAST*

Administrator

Name: *Buddy Minelli* **Phone:** *5703415012* **Email:** *SEMPEFI92@AOL COM*

Legal Entity

Name: *ANGELS FAMILY MANOR PERSONAL CARE HOME INC*
Address: *218 NORTH MAIN AVENUE, SCRANTON, PA, 18504*

Certificate(s) of Occupancy

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

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff:** *50* **Waking Staff:** *38*

Inspection

Type: *Partial* **BHA Docket #:** **Notice:** *Unannounced*
Reason: *Complaint*

Inspection Dates and Department Representative

06/18/2019 - On-Site; Jason Harvey

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *53* **Residents Served:** *50*

Secured Dementia Care Unit

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

Hospice

Current Residents: *3*

Number of Residents Who

Receive Supplemental Security Income: *43* **Are 60 Years of Age or Older:** *23*
Diagnosed with Mental Illness: *45* **Diagnosed with Intellectual Disability:** *3*
Have Mobility Need: *0* **Have Physical Disability:** *1*

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88a - Surfaces

Regulations

2600.
88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

The bathroom next to room #300 has a hole in the wall caused by a wheelchair wheel.

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.)

Resident hit wall with wheelchair, which was earlier that week. Sheetrock was cut out and the wall was replaced. We got it done as soon as possible. All other repairs will be done in timly manor.

The Administrator or designee will make periodic walk throughs of the home to ensure that floors, walls, ceilings, windows, doors and other surfaces are clean, in good repair and free of hazards. Repairs will be made timely to avoid hazards to residents, staff and visitors in the home. 10-24-19 ag

Legal Entity Representative

Signature | Buddy Minelli Admin | 10/15/19
Printed Name and Title | Date

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

The above plan of correction is approved as of 10-24-19 (Date)

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

Plan of correction implementation status as of 10-24-19 (Date)

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

95 Furniture and Equipment

Regulations

2600.
95. Furniture and Equipment - Furniture and equipment must be in good repair, clean and free of hazards.

Description of Violation

The bathroom next to resident bedroom #305 contained a ripped shower curtain and a broken shower rod.

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.)

Shower curtain and shower rod was broke in 305. Admin and manager will check periodically through out the week for repairs. Shower rod and curtain was replace and new ones were installed

Legal Entity Representative

Signature | Buddy Minelli Admin | 10/15/19
Printed Name and Title | Date

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- ☐ Not Implemented

187d - Follow Prescriber's Orders

Regulation:

2600.
187.d. The home shall follow the directions of the prescriber.

Description of Violation:

On 4/16/19 at 10:48am Geisinger Health Care faxed orders for surgery and to hold resident #1's Eliquis medication two days prior to surgery. The home failed to hold resident #1's Eliquis.

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 reason this occured is fax machine wasn't working. So the home never got the order til 4/16/19. PS from Aging was out as well. The appointment and hold orders where changed and patient had surgery before anyone came out. The homes Admin fixed it right away.

Legal Entity Representative:

Buddy Minelli — Buddy Minelli Admin 10/15/19

Signature — Printed Name and Title — Date

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