



**Mailing Date: November 27, 2019**

Ms. Brenda Yohn  
Administrator  
Shirley Home for the Aged, Inc.  
17050 Country View Lane  
Shirleysburg, Pennsylvania 17260

RE: Shirley Home for the Aged  
License #: 343970

Dear Ms. Yohn:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on November 20, 2019 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Brett Swanger". The signature is written in a cursive style.

Brett Swanger  
Human Services Licensing Supervisor

Enclosure  
Licensing Inspection Summary

# Violation Report

## Facility Information

Name: SHIRLEY HOME FOR THE AGED

License Number: 34397

Address: 17050 COUNTRY VIEW LANE,, SHIRLEYSBURG, PA 17260

County: HUNTINGDON

Region: CENTRAL

## Administrator

Name: Brenda Yohn

Phone: 8144473781

Email:

## Legal Entity

Name: SHIRLEY HOME FOR THE AGED INC

Address: 17050 COUNTRY VIEW LANE, SHIRLEYSBURG, PA, 17260

## Certificate(s) of Occupancy

Type: C-2 LP

Date: 04/02/2001

Issued By: L & I

## Staffing Hours

Resident Support Staff: 38

Total Daily Staff: 76

Waking Staff: 57

## Inspection

Type: Full

BHA Docket #:

Notice: Unannounced

Reason: Renewal

## Inspection Dates and Department Representative

11/20/2019 - On-Site: Michael Showers, Mike Palermo

## Resident Demographic Data as of Inspection Dates

### General Information

License Capacity: 42

Residents Served: 38

### Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

### Hospice

Current Residents: 0

### Number of Residents Who:

Receive Supplemental Security Income: 20

Are 60 Years of Age or Older: 36

Diagnosed with Mental Illness: 6

Diagnosed with Intellectual Disability: 8

Have Mobility Need: 0

Have Physical Disability: 1

54a - Direct Care Staff

Regulations

2600.

54.a. Direct care staff persons shall have the following qualifications:

- 2. Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry.

Description of Violation

Staff Person A does not have a high school diploma, GED, or active registry status on the PA nurse aide registry.

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.)

**Immediate Fix**

The Administrator reviewed the "diploma" the employee supplied to see what happened on November 21<sup>st</sup>, 2019.

At that time the employee supplied transcripts that showed grades and stated "she paid \$250 to be able to take a test for these grades." It was determined after investigating further on the internet that this was a fake diploma.

At that time the employee was told she will no longer be able to be a direct care staff member and offered her a position in the kitchen that does not require a diploma. The employee will train in the kitchen.

All employees' charts were reviewed for compliance with no additional problems found.

Completion date November 21, 2019

**Prevent from happening again**

Administrator will investigate all new employee's diploma to ensure that they are real.

Completion date: On Going

Legal Entity Representative

  
Signature

Brenda Yohn Administrator  
Printed Name and Title  
Date 11/26/19

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

The above plan of correction is approved as of 11/27/2019 (Date) Plan of correction implementation status as of 11/27/2019 (Date)

Fully Implemented

The above plan of correction was approved by BAS (Initials)  Not Implemented

132e - Fire Drill Sleeping Hours

Regulations

2600.

132.e. A fire drill shall be held during sleeping hours once every 6 months.

Description of Violation

The most recent fire drill performed during sleeping hours was on February 28, 2019.

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.)

**Immediate Fix**

The Administrator held another "sleep" fire drill on November 25<sup>th</sup> at 2310.

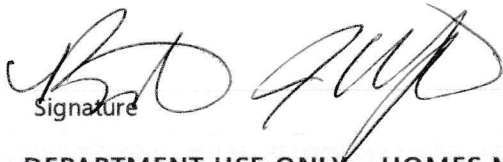
Complete date – November 25, 2019.

**Prevent from happening again**

The Administrator will do all future "sleep" fire drills at 2300 or later to ensure that the time compliance is met every 6 months.

Completion date: On Going

Legal Entity Representative

  
Signature

Brenda Ydun Administrator 11-26-19  
Printed Name and Title Date

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The above plan of correction is approved as of 11/27/2019 Plan of correction implementation status as of 11/27/2019  
(Date) (Date)

Fully Implemented

The above plan of correction was approved by BAS  
(Initials)  Not Implemented