

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC

February 1, 2023

[REDACTED]
PHOEBE HOME INCORPORATED
1925 TURNER STREET
ALLENTOWN, PA, 18104

RE: MILLER PERSONAL CARE AT 19TH
AND CHEW
1925 TURNER STREET
ALLENTOWN, PA, 18104
LICENSE/COC#: 21617

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/06/2022, 12/07/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,

[REDACTED]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: MILLER PERSONAL CARE AT 19TH AND CHEW **License #:** 21617 **License Expiration:** 12/08/2022
Address: 1925 TURNER STREET, ALLENTOWN, PA 18104
County: LEHIGH **Region:** NORTHEAST

Administrator

Name: [REDACTED] **Phone:** [REDACTED] **Email:** [REDACTED]

Legal Entity

Name: PHOEBE HOME INCORPORATED
Address: 1925 TURNER STREET, ALLENTOWN, PA, 18104
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I 1 **Date:** 05/30/2019 **Issued By:** City of Allentown
Type: C 2 LP **Date:** 12/05/1988 **Issued By:** PA L&I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 61 **Waking Staff:** 46

Inspection Information

Type: Full **Notice:** Unannounced **BHA Docket #:**
Reason: Renewal, Complaint, Incident, Monitoring **Exit Conference Date:** 12/07/2022

Inspection Dates and Department Representative

12/06/2022 On Site [REDACTED]
12/07/2022 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 60 **Residents Served:** 47

Secured Dementia Care Unit

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

Hospice

Current Residents: 1

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 47
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 4
Have Mobility Need: 14 **Have Physical Disability:** 4

Inspections / Reviews

12/06/2022 - Full

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 12/31/2022

Inspections / Reviews (*continued*)

01/08/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/31/2023

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 01/18/2023

01/23/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/31/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission

Follow-Up Date: 01/27/2023

02/01/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/31/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

42c - Treatment of Residents

1. Requirements

2600. 42.c. A resident shall be treated with dignity and respect.

Description of Violation

Resident # 1 states that staff member "A" yelled at them for using their call bell and then attempted to take it from them to prevent further use of the call bell.

Plan of Correction Accept [redacted] - 01/23/2023)

Who is responsible for fixing the problem and what did they do to fix it? Administrator terminated employee immediately following incident

What action that person will take, and when that action will happen . Employee was terminated immediately

Who will monitor ongoing compliance? Administrator will monitor monthly for compliance. All employees were educated on resident rights and the residents rights are discussed at monthly resident council meetings

All POC's at a minimum must include the above information. This administrator will re-educated on resident rights. This administrator will provide a copy of residents rights and go over their rights with each resident, answering any questions they may have.

Licensee's Proposed Overall Completion Date: 01/13/2023

Implemented [redacted] - 02/01/2023)

105g - Lint Removal and Duct Cleaning

2. Requirements

2600. 105.g. To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

Description of Violation

The clothes dryer located in the main laundry room on the third floor next to the washers, was found to have a heavy accumulation of lint in the lint trap at the time of inspection.

Plan of Correction Accept [redacted] - 01/23/2023)

Effective immediately the administrator will correct problem by creating signage, instructing each resident or staff who use dryer to check lint trap after each load. Housekeeping will check lint trap daily and document and log date it was cleaned.

The administrator will check lint trap daily during morning rounds of building for ongoing compliance

This administrator will discuss with housekeeping supervisor housekeeping's responsibility of emptying lint trap weekly and will maintain a log.

Licensee's Proposed Overall Completion Date: 01/13/2023

Implemented [redacted] - 02/01/2023)

141a 1-10 Medical Evaluation Information

3. Requirements

2600.

141.a. A resident shall have a medical evaluation by a physician, physician’s assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:

1. A general physical examination by a physician, physician’s assistant or nurse practitioner.
2. Medical diagnosis including physical or mental disabilities of the resident, if any.
3. Medical information pertinent to diagnosis and treatment in case of an emergency.
4. Special health or dietary needs of the resident.
5. Allergies.
6. Immunization history.
7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
8. Body positioning and movement stimulation for residents, if appropriate.
9. Health status.
10. Mobility assessment, updated annually or at the Department’s request.

Description of Violation

The DME dated [REDACTED]/2022 for Resident #1 was incomplete. The required section for body positioning and health status was left blank.

Plan of Correction

Accept [REDACTED] - 01/23/2023)

Administrator

Administrator is completing audit and correcting all DMEs effective immediately. The administrator, LPN and BSW will continue to audit any new DME daily for ongoing compliance.

This Administrator will re-educate medical groups/Physicians and nurses assigned to PCF on DME completion requirements. The nurse on duty will double check once DME is received from physician, any blank spaces identified will be returned to physician for completion.

Licensee's Proposed Overall Completion Date: 01/20/2023

Implemented ([REDACTED] - 02/01/2023)

225a - Assessment 15 Days

4. Requirements

2600.

225.a. A resident shall have a written initial assessment that is documented on the Department’s assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

Description of Violation

Resident #2 was admitted to the home on [REDACTED] 2022. Their assessment was not completed until [REDACTED]/2022.

Plan of Correction

Accept ([REDACTED] - 01/23/2023)

Administrator will correct error by completing assessment before 15th day after admission. Administrator and BSW will create a spread sheet for assessment due dates before 1/20/2023. Administrator will continue to monitor for ongoing compliance daily checking spread sheet daily

Administrator and Social worker will have calendar of assessment due dates and will maintain records of these assessments to be completed timely

Licensee's Proposed Overall Completion Date: 01/20/2023

225a - Assessment 15 Days (continued)

Implemented [REDACTED] - 02/01/2023)

225c - Additional Assessment

5. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

Description of Violation

The most recent RASP for resident #1 was dated [REDACTED]/2022 which is more than 1 year from the last RASP completed on [REDACTED] 2021.

Plan of Correction

Accept [REDACTED] - 01/23/2023)

Administrator is responsible for ensuring all RASP are completed timely. Administrator will create spread sheet and reminders of RASP due date two weeks before they are required to be completed. Administrator will continue ongoing compliance by monitoring spread sheet daily

Administrator and Social worker will have calendar of RASP due dates and moving forward will maintain compliance and complete timely.

Licensee's Proposed Overall Completion Date: 01/20/2023

Implemented [REDACTED] - 02/01/2023)

227a - Support Plan 30 Days

6. Requirements

2600.

227.a. A resident requiring personal care services shall have a written support plan developed and implemented within 30 days of admission to the home. The support plan shall be documented on the Department's support plan form.

Description of Violation

The RASP dated [REDACTED] 2022 for resident #3 indicates they are unable to self-administer their medications. The DME dated [REDACTED]/2022 indicates that the resident can self-administer with assistance offering medications at the correct time. Resident #3 indicates that their prescription medication [REDACTED] is left for them to self-administer. The medication was observed on the resident's bed side tray.

Plan of Correction

Accept [REDACTED] - 01/23/2023)

Administrator will be responsible for ensuring all support plans are correctly updated and followed. Administrator will complete audit of support plans beginning immediately. Support plans will be discussed at QA. Med techs will be re-educated on support plans and medication distribution. Administrator will continue ongoing compliance with daily audits

Executive director, administrator and social worker are meeting weekly with staff to update support plans for each resident. Resident #3 was in the room with [REDACTED] eye drops at the time the surveyor was interviewing [REDACTED]

227a - Support Plan 30 Days (*continued*)

Licensee's Proposed Overall Completion Date: 01/20/2023

Implemented [REDACTED] - 02/01/2023)