



September 11, 2014

Stacy Stroman, Director
Eldercare
1505 Morris Street
Waynesburg, PA 15370

RE: Eldercare
License # 080900 - Regular

Dear Ms. Stroman:

As a result of the Department of Aging's licensing inspection of the above named facility on 07/23/2014, five areas of non-compliance were identified. The legal entity submitted an acceptable written plan to correct each area of non-compliance. Therefore, the Department issued a Regular License, indicating compliance with applicable statutes, ordinances and regulations.

Thank you for your continued effort to provide quality older adult daily living services. If you have questions, please contact me at (717) 214-6716.

Sincerely,

A handwritten signature in black ink, appearing to read "Kevin Longenecker", is written over a light blue horizontal line.

Kevin Longenecker
Director

Enclosures

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF AGING

LICENSE

This license is hereby granted to COMMUNITY ACTION SOUTHWEST
LEGAL ENTITY

To operate ELDERCARE
(NAME OF CENTER)

Located at 1505 MORRIS STREET WAYNESBURG, PA 15370
(COMPLETE ADDRESS OF CENTER)

To provide older adult daily living services.

The total number of persons which may be served at one time may not exceed 14
(MAXIMUM CAPACITY)

Restrictions: _____

This license is granted in accordance with the Act of July 11, 1990 (P.L. 499, No. 118) and Regulations.

TITLE 6. PA CODE. CHAP. 11. OLDER ADULT DAILY LIVING CENTER Dated July 03, 1993
(NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from October 01, 2014 until September 30, 2015

unless sooner revoked for non-compliance with applicable laws and regulations.

No: 080900 - Regular



ISSUING OFFICER

NOTE: This license is issued for the above address only and is not transferable. This license should be posted in a conspicuous place in the center.

Issued On: September 11, 2014

AGL01

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER LICENSE NUMBER: 080900	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED 07/25/2014
NAME OF PROVIDER OR SUPPLIER Eldercare		STREET ADDRESS, CITY, STATE, ZIP CODE 1505 MORRIS STREET WAYNESBURG, PA 15370		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
1 000	Initial Comments A State licensure visit was completed on 07/23/14 and 07/25/14 and it was determined that Eldercare was not in compliance with the following requirements of 6 PA Code, Chapter 11, Older Adult Daily Living Centers regulations:	1 000		
11500	11.90(a) Fire safety training for clients A client shall be instructed upon initial admission and reinstructed quarterly in general fire safety, evacuation procedures, responsibilities during fire drills and the designated meeting place outside the building or within the fire safe area in the event of an actual fire. A client shall also be instructed in smoking safety procedures if clients or staff persons smoke at the center. This STANDARD is not met as evidenced by: Findings: Based on a review of client records, it was determined that client #1 did not receive fire safety training each quarter. Client #1 was absent from the center January and February 2014, the client returned to the center on 3/26/14 and did not received fire safety training in the first quarter upon their return.	11500	Plan of Correction is required 11.90(a) The Site Supervisor will complete quarterly reviews with all absent clients upon their immediate return. The Director of Senior Services will monitor compliance during the bi-weekly review.	8/5/14

AUTHORIZED PROVIDER REPRESENTATIVE'S SIGNATURE

Alice J. Stroman

TITLE

Director

(X6) DATE

8/6/14

DEPARTMENT OF AGING APPROVAL

Kevin [Signature]

DATE

Chief, Division of Licensing

9/8/14

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11550	<p>11.101(a) Intake screening</p> <p>The center shall complete, or arrange for the completion of, an intake screening for each applicant in order to determine the appropriateness of the older adult daily living center for that individual. The screening shall be completed within 60 days prior to admission.</p> <p>This STANDARD is not met as evidenced by:</p> <p>Findings: Based on a review of client records, it was determined that a center client did not have the intake screening completed within sixty days prior to admission. A review of the record for Client #2 revealed that the client's intake screening was completed on the initial day of attendance of 09/30/11.</p>	11550	<p>11.101(a) The Site Supervisor will complete the intake screening prior to the admission date to ensure that the client is eligible for the program. The Director of Senior Services must approve all new admissions prior to their start date.</p>	8/5/14
11680	<p>11.105(a) Review and revision of individual care plan</p> <p>A review of the client's progress on the plan shall be completed or coordinated at least every 6 months for clients in attendance at the center. At the time of each semiannual progress review each plan shall also be revised if necessary.</p> <p>This STANDARD is not met as evidenced by:</p>	11680	<p>11.105(a) The care plan revision/review will be completed by the Site Supervisor at least every 6 months or immediately upon the return of an absent client. The Director of Senior Services will monitor compliance during the bi-weekly review.</p>	8/5/14

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11760	<p>Findings: Based on a review of client records, it was determined that the care plan revision for client #2 was not completed when the client returned to the center from Florida on 04/17/12. The care plan revision was not developed until 05/09/12.</p> <p>11.109 Service documentation</p> <p>Progress notes on each client shall be written at least monthly and shall also be written as needed to reflect a review of the care plan and goals and objectives in light of changes in the client's status. Treatment notes and notes on significant events, when appropriate, shall be recorded according to professional standards.</p> <p>This STANDARD is not met as evidenced by:</p> <p>Findings: Based on a review of client records it was determined that the center failed to ensure that written progress notes were completed at least monthly.</p> <p>Client #1 did not have written progress notes for 02/2014, client was absent from the center for the month of February.</p> <p>Client #2 did not have written progress notes for 12/2011, 01/2012 and 02/2012, client was away in Florida .</p>	11760	<p>11.109 The Site Supervisor will write progress notes monthly for each client, including when client is absent from the program. The Director of Senior Services will monitor compliance during the bi-weekly review.</p>	8/5/14

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12230	<p>11.152 Food provided or arranged for by center</p> <p>If the center provides or arranges for meals for clients, the following requirements apply:</p> <p>(1) Cold food shall be kept at or below 45°F. Hot food shall be kept at or above 140°F. Frozen food shall be kept at or below 0°F.</p> <p>(2) Written daily menus shall be prepared and posted in a location visible to the clients. Menus shall be posted at least 1 program day prior to the menu date. Written menus shall be followed. Written menus shall be retained for at least 2 months.</p> <p>(3) At least one complete meal shall be provided if the client is at the center for 4 or more hours. If a client is at the center for more than 6 hours, a nutritional snack shall be provided.</p> <p>(4) Each meal served shall contain at least one item from the dairy, protein, fruits and vegetables and grain food groups, unless medically contraindicated for individual clients.</p> <p>(5) Quantity of foods served at each meal shall contain at least 1/3 of the daily-recommended dietary allowances as established by the Food and Nutrition Board of the National Research Council.</p> <p>(6) Prescribed diets for clients with medically restricted diets shall be followed. A written record of prescribed diets shall be kept in the client's file.</p> <p>(7) The ethnic and religious preferences of clients shall be considered when planning menus.</p> <p>(8) Food shall be protected from contamination while being stored, prepared, served and transported. Food shall be stored in sealed containers.</p>	12230	<p>11.152 Greene County Central Kitchen staff and Waynesburg Senior Center staff were retrained on safe food temperatures and filling out the temp log accurately on 7/30/14. The kitchen thermometers were recalibrated; all kitchen staff were retrained in this process. The thermometers will be recalibrated bi-weekly to ensure temperatures are accurate. Site Supervisors at both sites will review the temp logs daily prior to consumption of food to ensure food temperatures are safe. During transportation of food from the Central Kitchen to the Waynesburg Senior Center and Eldercare, hot plates and cold packs will be used to ensure safe food temperatures. All Senior Center Site Supervisors (including the Central Kitchen) have been ServeSafe certified effective 8/1/14. Eldercare resumed keeping its own food temperature logs on-site on 7/28/14. The Center Services Manager will monitor compliance during monthly reviews.</p>	7/30/14

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12230	<p>Continued From page 4</p> <p>(9) Utensils used for eating, drinking, preparation and serving of food or drink shall be washed after each use by a mechanical dishwasher or by a method approved by the Department of Environmental Resources.</p> <p>(10) Mechanical dishwashers shall use hot water temperatures exceeding 140°F in the wash cycle and 180°F in the final rinse cycle or shall be a chemical sanitizing type approved by the National Sanitation Foundation.</p> <p>This STANDARD is not met as evidenced by:</p> <p>Findings: Meals are provided by an outside company and transported hot to the senior center daily. The temperature of the food is taken once it arrives at the senior center. Based on a review of temperature logs, it was discovered that the hot food temperatures are occasionally below the minimum requirement of 135° F set by the Department of Agriculture.</p> <p>Examples of non-compliance were on, 07/23/14- Pot roast 132° F, 07/11/14- Steak Burgers 120° F , 04/14/14- Orange Chicken 131° F.</p> <p>Also, based on a review of temperature logs, it was discovered that cold foods were not kept at or below 41° F as required by the Department of Agriculture.</p> <p>Examples of non-compliance were on 07/22/14- Turkey salad 42° F, 07/11/14- Macaroni salad 47° F, 07/09/14- Tuna 56° F.</p>	12230		

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12230	Continued From page 5 Many of the food temperature log entries were not correctly entered under the proper headings.	12230		