



**COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE**

**11 Stanwix Street
Room 230
Pittsburgh, Pennsylvania 15222**

ADULT RESIDENTIAL LICENSING

**Phone: (412) 565-5616/5614
Toll Free: 1-888-322-3664
Fax: (412) 565-5633/565-2840
www.dpw.state.pa.us**

OCT 29 2010

Ms. Alma A. Hoffman, Owner/Administrator
Senior Care Plaza Associates, Inc.
Senior Care Plaza
624 Lysle Boulevard
McKeesport, Pennsylvania 15132

Dear Ms. Hoffman:

As a result of the Department of Public Welfare's licensing inspection on June 16, 2010 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations 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. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

Sincerely,

A handwritten signature in cursive script, appearing to read "Janine Wenzig".

**Janine Wenzig
Regional Licensing Administrator**

Enclosure(s)

Western Region
VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600
SEP 1 2010

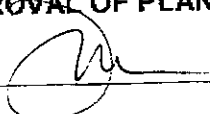
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NAME AND ADDRESS OF PERSONAL CARE HOME Senior Care Plaza, 624 Lysle Boulevard, McKeesport, PA 15132		CURRENT LICENSE NUMBER 431060	
INSPECTION DATE(S) (include all dates of the inspection) June 16, 2010		REGIONAL REPRESENTATIVE Caroline Goedert	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Matthew R Hoffman Administrator</i>			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Matthew R Hoffman</i>	DATE 8/27/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 10/15/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
202 The following procedures are prohibited: (1) Seclusion, defined as involuntary confinement of a resident in a room from which the resident is physically prevented from leaving, is prohibited. (2) Aversive conditioning, defined as the application of startling, painful or noxious stimuli, is prohibited.	Resident #1 was ordered Alprazolam 0.25mg, take one tablet three times a day as needed for Anxiety/Panic Disorder. Staff persons administered Alprazolam 0.25mg to resident #1 and documented the reason on the back of the medication record as the resident being agitated on the following dates: 4/2/10, 4/3/10, 4/4/10, 4/5/10,	SEP 15, 2010	① Resident #1 Plan of Care and MAR was reviewed. Resident has since moved to higher level of care facility. ② STAFF HAS BEEN RE-TRAINED on PRN Usage and documentation terminology. ③ DIRECTOR OF Resident Services and Administrator will monitor PRN Activity on a monthly basis.	Steps have been taken to correct violation; full compliance is not verifiable 10/15/10 <i>jm</i> Date Initials (DPW)

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		DATE 10/15/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
(3) Pressure point techniques, defined as the application of pain for the purpose of achieving compliance, is prohibited. (4) A chemical restraint, defined as use of drugs or chemicals for the specific and exclusive purpose of controlling acute or episodic aggressive behavior, is prohibited. (5) A mechanical restraint, defined as a device that restricts the movement or function of a resident or portion of a resident's body,	4/6/10, 4/7/10, 4/8/10, 4/9/10, 4/10/10, 4/11/10, 5/11/10, 5/12/10, 5/14/10, 5/15/10, 5/16/10, 5/20/10, 5/21/10, 5/22/10, 5/23/10, and 5/25/10. In addition, staff persons administered Alprazolam 0.25mg to resident #1 and documented the reason on the back of the medication record as the resident being uncooperative on the following dates: 4/11/10 and 4/17/10.			

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is prohibited. (6) A manual restraint, defined as a hands-on physical means that restricts, immobilizes or reduces a resident's ability to move his arms, legs, head or other body parts freely, is prohibited.				