



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

APR 25 2018

Ms. Shannon Watson  
Administrator  
Forbes Personal Care, LLC  
105 River Avenue, Suite 202  
Lakewood, New Jersey 08701

RE: Forbes Road Residence  
6655 Frankstown Avenue  
Pittsburgh, Pennsylvania 15206  
Certificate #: 443200

Dear Ms. Watson:

As a result of the Department of Human Services' annual licensing inspection on June 8, 2017, of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to [https://www.surveymonkey.com/r/BHSL\\_Inspection](https://www.surveymonkey.com/r/BHSL_Inspection).

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Rowe'.

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary



JAN 30 2018

Violation Report: 44320 - 06/08/2017 - Evesges, Joseph  
PCH Name: FORBES ROAD RESIDENCE

WEST REGIONAL OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Code §2600  
2600.18 - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

2a. DESCRIPTION OF VIOLATION

The home's boilers do not have current inspection certificates from Pennsylvania Department of Labor and Industry. Boilers #173419B, #549976V and #112510B did not pass inspection by Pennsylvania Department of Labor and Industry conducted on 3/20/17.

3. 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 home shall comply with Applicable Federal, state, and local regulations. Boilers #173419B, #549976V, and #112510B were repaired and inspected. Boilers #173419B and #549976V had all repairs completed, and approved for inspection. Boiler #112510B was repaired but was found to need additional work that is currently being completed. Combustion Service; Equipment has provided a detailed list of repairs, (see attached) that were completed to bring boilers into compliance with all applicable Federal, State, and local laws, ordinances and regulations. Repairs will be made and re-inspection is set to occur after the completion of new repairs is completed. Combustion Services; Equipment, Chubb insurance, Director of maintenance for Forbes, and administrator will ensure that boiler maint. will ensure that boiler upkeep and inspection is kept up to date to ensure continued compliance with Federal, state, and local ordinances and regulations. Labor and industry will be contacted for an additional inspection to ensure compliance.

Repeat Violation: No      Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page) *Shannon Watson*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Shannon Watson*      Date: *1/20/18*

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The above plan of correction is approved as of 2-8-18  
(Date)

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

Plan of correction implementation status as of 2-8-18  
(Date)

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

Violation Report: 44320 - 08/08/2017 - Evegas, Joseph  
PCH Name: FORBES ROAD RESIDENCE

WEST REGION FIELD OFFICE  
Human Services Division

1. REGULATION 55 Pa.Code §2600  
2600.25(b) - The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

2a. DESCRIPTION OF VIOLATION  
Resident 1's resident/home contract, dated [redacted]/17, was not signed by the resident. There was no indication that the resident was unable or refused to sign the resident/home contract.

3. 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 # 1 HAS completed contract that includes the Resident's signature  
Resident contracts will be completed - prior to admission or within twenty four (24) hours of admission.  
Compliance to be monitored by the administrator / designer and the QM/QA committee  
Administrator: 24 After Admission  
QM/QA committee - AT LEAST Quarterly  
Immediately: The Administrator or designated staff person shall review all resident contracts for required signatures. 2-9-17

Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page)		<i>Shannon Watson</i>	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)		Date	<i>11/21/17</i>
<i>Shannon Watson</i>			

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The above plan of correction is approved as of <u>2-8-17</u> (Date)	Plan of correction implementation status as of <u>2-8-17</u> (Date)
The above plan of correction was approved by <u>K</u> (Initials)	<input type="checkbox"/> Fully Implemented
	<input checked="" type="checkbox"/> Partially Implemented - Adequate Progress
	<input type="checkbox"/> Partially Implemented - Inadequate Progress
	<input type="checkbox"/> Not Implemented

Violation Report: 44320 - 06/08/2017 - Eveses, Joseph  
PCH Name: FORBES ROAD RESIDENCE

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2800.65(g) - Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:

- (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert.
- (2) Emergency preparedness procedures and recognition and response to crises and emergency situations.
- (3) Resident rights.
- (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101-10225.5102).
- (5) Falls and accident prevention.
- (6) New population groups that are being served at the home that were not previously served, if applicable.

2a. DESCRIPTION OF VIOLATION

Direct care staff A, hired 7/28/12, did not receive training in the following topics during the 2016 training year (1/1/16 - 12/31/16): fire safety, emergency preparedness and falls and accident prevention.

3. 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.

Direct STAFF PERSON A HAS COMPLETED, FIRE SAFETY, EMERGENCY PREPAREDNESS AND FALL AND PREVENTION TRAINING AS REQUIRED EACH TRAINING YEAR.

COMPLIANCE TO BE MONITORED BY THE ADMINISTRATOR/DEPT. HEAD. THE ADMINISTRATOR WILL EXAM THE SIGN IN SHEET FOR STAFF SIGNATURES IMMEDIATELY AFTER THE TRAINING SESSION AND BEFORE THE END OF THE TRAINING YEAR.

QA/QM WILL MONITOR TRAINING PARTICIPATION AT LEAST QUARTERLY AND BEFORE THE END OF THE TRAINING YEAR.

Repeat Violation: Yes

Date(s) of Previous Violation(s):

07/18/2016

Signature of Legal Entity Representative  
(Required on EVERY Page)

*Shannon Watson*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page)

Shannon Watson

Date

11/21/17

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2-8-18  
(Date)

Plan of correction implementation status as of

2-8-18  
(Date)

The above plan of correction was approved by

*[Signature]*  
(Initials)

- Fully Implemented
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- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 44320 - 08/08/2017 - Evesges, Joseph PCH Name: FORBES ROAD RESIDENCE	WEST REGION FIELD OFFICE Human Services Licensing
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1. REGULATION 55 Pa.Code §2600  
2600.103(f) - Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

2a. DESCRIPTION OF VIOLATION  
The temperature in the silver stand up refrigerator in the home's kitchen measured 49 degrees Fahrenheit at 10:10 a.m.  
There was no working thermometer in the refrigerator section of the refrigerator/freezer located in the second floor dining room.  
The temperature in the refrigerator in the refrigerator section of the refrigerator/freezer located in the third floor lounge measured 48 degrees Fahrenheit at 10:40 a.m.  
There was no working thermometer in the freezer section of the refrigerator/freezer located in the third floor lounge.

3. 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 thermometer for the silver stand up refrigerator in the homes kitchen has been replaced with a new thermometer.

The refrigerator section of the refrigerator freezer on the second floor now has a working thermometer.

The refrigerator section of the refrigerator/freezer located in the second floor lounge is equipped with a new thermometer.

The freezer section of the refrigerator located in the third floor lounge now has a working thermometer.

Compliance will be monitored by the administrator/designee daily.  
A monitor will be utilized and placed within kitchen for daily monitoring.

Repeat Violation: Yes	Date(s) of Previous Violation(s):	07/18/2015
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Signature of Legal Entity Representative  
(Required on EVERY Page) *Shannon Watson*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Shannon Watson* Date *11/21/17*

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Violation Report: 44320 - 06/08/2017 - Eveses, Joseph  
PCH Name: FORBES ROAD RESIDENCE

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Code §2800  
2600.105(g)(2) - Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

2a. DESCRIPTION OF VIOLATION

There was an approximately 1/2 inch thick layer of lint covering the wall, floor, back of the clothes dryer and the vent duct of clothes dryer in the second floor resident laundry room.

3. 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 LINT shall be cleaned from the vent duct and internal and external DUCT WORK of clothes dryers according to MANUFACTURERS INSTRUCTIONS  
The LINT COVERING THE WALL FLOOR, BACK OF THE clothes dryer and the vent duct of clothes dryer in the second floor resident laundry room has been removed. IN LIEU OF THE MANUFACTURERS INSTRUCTIONS (NONE AVAILABLE) THE MAINTENANCE STAFF HAVE CLEANED THE VENT DUCTS INTERNAL AND EXTERNAL. LINT WILL BE REMOVED daily.  
Compliance will be monitored by the Administrator/designee on a daily basis. A Monitor will be utilized and signed by the person removing the lint daily

Repeat Violation: No      Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page) *Shannon Watson*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Shannon Watson*      Date *11/21/17*

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(Date)

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- Partially Implemented - Inadequate Progress
- Not Implemented

The above plan of correction was approved by *[Signature]*  
(Initials)

September 27, 2017

Violation Report: 44320 - 08/08/2017 - Eveses, Joseph  
PCH Name: FORBES ROAD RESIDENCE

WEST REGION FIELD OFFICE  
Human Services Division

1. REGULATION 56 Pa.Code §2600  
2600.132(b) - A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.

2a. DESCRIPTION OF VIOLATION  
The most recent fire inspection and fire drill conducted by a fire safety expert was completed on 12/17/15.

3. 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.

A FIRE INSPECTION, SUPERVISED FIRE DRILL AND TRAINING WAS COMPLETED ON SEPTEMBER 27, 2017 WITH [REDACTED] FIRE SAFETY EXPERT. THE ENTIRE PCH STAFF WAS EDUCATED. FIRE DRILL AND SAFETY INSPECTION WILL BE DONE ON A YEARLY BASIS. COMPLIANCE TO BE MONITORED BY THE ADMINISTRATOR / DESIGNATEE.

Repeat Violation: No      Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page) *Sharon Watson*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) Sharon Watson

Date 11/21/17

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(Date)

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(Initials)

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- Not Implemented

Violation Report: 44320 - 08/08/2017 - Evoges, Joseph PCH Name: FORBES ROAD RESIDENCE		WEST REGION FIELD OFFICE Human Services Licensing	
1. REGULATION 65 Pa.Code §2600 2600.132(c) - A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.			
2a. DESCRIPTION OF VIOLATION The home's fire drill record does not include the exit routes used for fire drills as follows: * Fire drill conducted on 5/16/16 at 8:00 a.m. * Fire drill conducted on 11/29/16 at 8:16 p.m.  The home's fire drill record does not include the time it took for evacuation for fire drills as follows: * Fire drill on 10/31/16 at 2:40 p.m. * Fire drill on 9/10/16 at 7:45 a.m. * Fire drill on 9/18/16 at 2:35 p.m. * Fire drill on 9/30/16 at 6:30 a.m.			
3. 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.			
<p>The homes Fire drill Record will include the exit Routes used for Fire drills</p> <p>The homes Fire drill Record will include evacuation times</p> <p>Compliance to be monitored by the Administrator/ Designer</p> <p>The QA/QM Committee will review Fire drill records for completeness (Route and Time)</p> <p>Immediately: The Administrator shall monitor the fire drill record monthly to ensure compliance with 26 Pa.CS(2600.132(c)). 2-9-18</p>			
Repeat Violation: Yes	Date(s) of Previous Violation(s):	07/18/2016	
Signature of Legal Entity Representative (Required on EVERY Page)		<i>Sharon Walker</i>	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)		Date	11/21/17
<b>DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!</b>			
The above plan of correction is approved as of <u>2-8-18</u> (Date)		Plan of correction implementation status as of <u>2-8-18</u> (Date)	
The above plan of correction was approved by <u><i>[Signature]</i></u> (Initials)		<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented	

Violation Report: 44320 - 06/08/2017 - Evagos, Joseph PCH Name: FORBES ROAD RESIDENCE	WEST REGION FIELD OFFICE Human Services Licensing
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**1. REGULATION 55 Pa.Code §2600**

2600.132(d) - Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.

**2a. DESCRIPTION OF VIOLATION**

The home does not have a fire safe evacuation time specified in writing by a fire safety expert within the past year. The home exceeded a fire drill evacuation time of 2 minutes and 30 seconds as follows:

- \* On 4/27/17 at 4:00 a.m. - 6 minutes and 0 seconds
- \* On 3/22/17 at 3:05 p.m. - 6 minutes and 0 seconds
- \* On 2/16/17 at 9:30 a.m. - 7 minutes and 0 seconds
- \* On 1/24/17 at 2:20 p.m. - 5 minutes and 0 seconds
- \* On 12/27/17 at 3:45 p.m. - 6 minutes and 0 seconds
- \* On 11/20/16 at 6:16 p.m. - 3 minutes and 0 seconds

On 5/16/17 at 8:00 a.m., the home conducted a fire drill with 20 residents present in the home. However, no residents were evacuated during the fire drill.

On 4/27/17 at 4:00 a.m., the home conducted a fire drill with 20 residents present in the home. However, only 19 residents were evacuated during the fire drill.

On 3/22/17 at 3:05 p.m., the home conducted a fire drill with 20 residents present in the home. However, only 19 residents were evacuated during the fire drill.

On 2/16/17 at 9:30 a.m., the home conducted a fire drill with 20 residents present in the home. However, only 19 residents were evacuated during the fire drill.

On 1/24/17 at 2:20 p.m., the home conducted a fire drill with 20 residents present in the home. However, only 18 residents were evacuated during the fire drill.

On 12/27/16 at 3:45 p.m., the home conducted a fire drill with 20 residents present in the home. However, only 19 residents were evacuated during the fire drill.

On 10/31/16 at 4:20 p.m., the home conducted a fire drill with 20 residents present in the home. However, no residents were evacuated during the fire drill.

On 9/18/16 at 2:36 p.m., the home conducted a fire drill with 25 residents present in the home. However, no residents were evacuated during the fire drill.

On 8/10/16 at 7:45 p.m., the home conducted a fire drill with 27 residents present in the home. However, no residents were evacuated during the fire drill.

**3. 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.*

Repeat Violation: Yes	Date(s) of Previous Violation(s):	07/18/2016
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Signature of Legal Entity Representative (Required on EVERY Page)	
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
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The above plan of correction is approved as of 2-8-18  
(Date)

Plan of correction implementation status as of 2-8-18  
(Date)

- Fully Implemented
- Partially Implemented - Adequate Progress ✓

Violation Report: 44320 - 06/08/2017 - Eveses, Joseph FCH Name: FORBES ROAD RESIDENCE	
1. REGULATION 55 Pa.Code §2600 2600.132(d) - Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.	
The above plan of correction was approved by <u>EW</u> (Initials)	<input checked="" type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

27 September 2017 - Fire Safety expert [REDACTED] has designated A FIRE SAFETY AREA IN WRITING. The FIRE SAFE AREA will be inspected and evaluated on a yearly basis by a Fire Safety expert. Compliance to be monitored by the Administrator and the QA/QM Committee on a yearly basis.

Immediately: The administrator shall monitor all fire drills and the fire drill record monthly to ensure all residents are evacuated to the public thoroughfare or a fire safe area, designated in writing by a fire safety expert within the past year, within the safe evacuation time, specified in writing by the fire safety expert within the past year.

2-5194

RECEIVED

NOV 21 2017

WEST REGION FIELD OFFICE  
Human Services Unit

Violation Report: 44320 - 08/08/2017 - Eveses, Joseph  
PCH Name: FORBES ROAD RESIDENCE

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 66 Pa.Codé §2600  
2800.225(c) - The resident shall have additional assessments as follows:  
(1) Annually.  
(2) If the condition of the resident significantly changes prior to the annual assessment.  
(3) At the request of the Department upon cause to believe that an update is required.

2a. DESCRIPTION OF VIOLATION  
Resident #3's had an assessment completed on 2/7/16. However, the resident's next assessment was not completed until 5/10/17.

3. 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 1 & 3 will have an assessment done in a timely manner going forward. An updated assessment has been completed. The annual assessments will be completed in a timely manner. The completion date of the assessments will not exceed the date of the prior assessment. Compliance to be monitored by Administrator/designee. QA/QM committee will review assessments on a regular basis at least quarterly.

Repeat Violation: No      Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page) *Shannon Watson*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Shannon Watson*      Date *11/21/17*

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The above plan of correction was approved by *S*  
(Initials)