



MAILING DATE: August 8, 2019

Mr. Stephen Rodrigues
President/CEO
St. Stephen S Living Center, LLC
1075 Chestnut Street
Nanty Glo, Pennsylvania 15943

RE: St. Stephen's Living Center
Certificate: 327360

Dear Mr. Rodrigues:

As a result of the Department's Bureau of Human Services Licensing inspection on January 29, 2019, June 13, 2019 and July 10, 2019 of the above facility, the citations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation reports were found.

All citations specified on the enclosed violation reports must be corrected by the dates specified on each violation report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

Gloria Emick

Gloria Emick
Human Services Licensing Supervisor

Enclosure
Violation Reports

**VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: ST STEPHEN S LIVING CENTER		License Number: 32736
Address: 1075 CHESTNUT STREET, NANTY GLO, PA 15943		County: Cambria
Administrator: Deborah Gabor		Region: CENTRAL
Legal Entity Name: ST STEPHENS LIVING CENTER LLC		
Legal Entity Address: 1075 CHESTNUT STREET, NANTY GLO, PA 15943		
Certificate(s) of Occupancy		
C-2 LP 09/22/1994 L&I	C-2 LP 01/26/1989 L&I	
Staffing Hours		
Resident Support: 0	Total Daily Staff: 19	Waking Staff: 14
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Complaint		
On-Site Inspections Dates and Department Representatives On-Site 01/29/2019: Rosenblat, Dale		
Off-Site Inspection Dates and Inspectors, if Applicable		
Rec'd 2/27/19 GE		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 44 Number of Residents Served: 19 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 0 Number of Hospice Residents in past year: 0	Number of Residents who: Receive Supplemental Security Income: 13 Are 60 Years of Age or Older: 16 Have Mental Illness: 11 Have an Intellectual Disability: 0 Have a Mobility Need: 0 Have a Physical Disability: 1	

Violation Report: 32736 - 01/29/2019 - Rosenblat, Dale
 PCH Name: ST STEPHEN S LIVING CENTER

1. REGULATION 55 Pa.Code §2600
 2600.85(b) - There may be no evidence of infestation of insects or rodents in the home.

2a. DESCRIPTION OF VIOLATION
 During the inspection, a live bed bug was found crawling on the bathroom wall next to Room One.

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.

Orkin Pest Control called in (see attached), and treated infested areas. Orkin Pest Control will be called in to follow up with any other infestations in the home.

The Administrator/Designee will make regular rounds to inspect for infestations. If infestation were to be found, Orkin Pest Control will be called back in for treatment.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Deborah Gabor*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) DEBORAH GABOR Administrator Date 02/26/2019

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>5/30/19</u> (Date) The above plan of correction was approved by <u>GE</u> (Initials)	Plan of correction implementation status as of <u>7/10/19</u> (Date) <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
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Violation Report

Facility Information

Name: *ST STEPHEN'S LIVING CENTER*

License Number: 327360

Address: *1075 CHESTNUT STREET, NANTY GLO, PA 15943*

County: *CAMBRIA*

Region: *CENTRAL*

Administrator

Name: *DEBORAH GABOR*

Phone: *8147498799*

Email: *STEPHENSLIVINGCENTER@COMCAST NET*

Legal Entity

Name: *ST STEPHENS LIVING CENTER LLC*

Address: *1075 CHESTNUT STREET, NANTY GLO, PA, 15943*

Certificate(s) of Occupancy

Type: *C-2 LP*

Date:

Issued By:

Type: *C-2 LP*

Date: *09/22/1994*

Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0*

Total Daily Staff: *23*

Waking Staff: *17*

Inspection

Type: *Partial*

BHA Docket #:

Notice: *Unannounced*

Reason: *Complaint*

Inspection Dates and Department Representative

06/13/2019 - On-Site: Cybil Bomberger, Dale Rosenblat

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *44*

Residents Served: *23*

Secured Dementia Care Unit

In Home: *No*

Area:

Capacity:

Residents Served:

Hospice

Current Residents: *2*

Number of Residents Who:

Receive Supplemental Security Income: *18*

Are 60 Years of Age or Older: *16*

Diagnosed with Mental Illness: *10*

Diagnosed with Intellectual Disability: *1*

Have Mobility Need: *0*

Have Physical Disability: *1*

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28a - Refunds

Regulations

2600.

28.a. If, after the home gives notice of discharge or transfer in accordance with § 2600.228(b) (relating to notification of termination), and the resident moves out of the home before the 30 days are over, the home shall give the resident a refund equal to the previously paid charges for rent and personal care services for the remainder of the 30-day time period. The refund shall be issued within 30-days of discharge or transfer. The resident's personal needs allowance shall be refunded within 2 business days of discharge or transfer.

Description of Violation

On 5/29/19, the home issued a discharge notice to Resident #1. On 5/29/19 the resident was admitted to the behavioral health unit of the hospital due to threatening residents and staff. The resident was due a refund for the 2 remaining days in the month of May and any payment received by the home for the month of June 2019 as the resident would not be returning to the home.

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 refund was issued to the resident on June 16th 2019, within the timeframe allowed under the regulations. See attached copy of check and statement.

Legal Entity Representative

Deborah Gabor
Signature

ADMINISTRATOR DEBORAH GABOR
Deborah Gabor 06/19/2019
Printed Name and Title Date

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The above plan of correction is approved as of

7/10/19
(Date)

Plan of correction implementation status as of

7/10/19
(Date)

The above plan of correction was approved by

GE
(Initials)

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

06/13/2019

85a - Sanitary Conditions

Regulations

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

The electric cord for the controls to Bed B in Room #1 and the wall next to Bed B in Room #1 were smeared with blood. The administrator stated that the resident had experienced an injury causing bleeding.

There were feces smeared on the vanity sink in the bathroom next to Room #9.

Blood smears that are the result of bed bugs being killed were found on the walls next to beds in Rooms #1, 2, 3, 4, 6, 10 and 11. Blood spots from bed bugs were on the sheets of beds 2A, 3A, 3B, 4A, 4B, 5A, 5B, 5C, 6A&B, 10A, 10B, 11A, 11B and 12B.

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 electric cord for the controls to bed B in room #1 unoccupied and the wall next to bed B have been cleaned. A cleaner with bleach was used to clean the vanity sink in the bathroom next to room #9. Blood smears on the walls next to the beds in rooms #1,2,3,4,6, 10, and 11 have been cleaned. All linens in all resident rooms have been laundered on 06/13/2019. New linens have been ordered for replacement as needed. Staff will continue to monitor all residents rooms and bathrooms daily. Any issues that arise will be addressed immediately. The Administrator or designee will monitor for compliance.

Legal Entity Representative

Deborah Gabor
Signature

ADMINISTRATOR
DEBORAH GABOR
Printed Name and Title
06/19/2019
Date

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06/13/2019

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85b - Infestation

Regulations

2600.

85.b. There may be no evidence of infestation of insects or rodents in the home.

Description of Violation

Live bed bugs were on the beds in Rooms #2, 3, 4, 5, 6, 9, 10, 11, 12, 13. Live bed bugs were on the walls in Rooms #2, 3, 4, and 6. Live bed bugs were on furniture including the bedside stand in Room #4, and the upholstered reclining chairs in the living room. Residents #2, 3, 4, 5, 6 and 7 were observed to have multiple bed bug bites all over their bodies and stated they were very bothered by the bites.

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.)

All resident rooms were treated by MacLaughlin Pest Control on June 14th 2019. The treatment is ongoing by the pest control company. All residents clothing were bagged and labeled. All clothing was then put through the dryer on high heat. All mattresses had a cover put on them. The mattress covers are BedBug proof. All staff members are provided with access to a spray bottle that has 91% strength rubbing alcohol to spray any bed bugs seen by them or notified to them by residents. Reclining chairs infested with bed bugs have been either treated or disposed of. Beds, bed stands, mattresses, and furniture in resident rooms, living rooms, and dining room including the pantry areas have been treated. All residents and resident rooms are being monitored daily by the Administrator +/- or designee. Effective action will be taken. Treatment is ongoing by the pest control company. A log is being maintained and the pest control company is briefed on the findings twice a week. The pest control company has agreed to come in to treat frequently any areas deemed problematic on an ongoing basis.

Legal Entity Representative

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88a - Surfaces

Regulations

2600.

88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

There is water on the floor of the basement near the main water supply line, the floor of the back room, and on the floor of the furnace room for the dining room. The back room of the basement also has bags of resident belongings, clothing and bedding piled on the floor and strewn about the floor. There are piles of fiberglass insulation on the floor in the back room of the basement. The other rooms of the basement near the inside stairs have boxes of various items, wheelchairs, walkers and miscellaneous furniture items piled and strewn about.

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 water on the floor of the basement is being addressed. The resident belongings have been removed and returned to the residents. The basement is being organized. All unnecessary items not of use or need will be removed to the dumpster. All other items will be organized in the basement.

The Administrator +/or designee will monitor for compliance.

Legal Entity Representative

Deborah Gabor
Signature

ADMINISTRATOR
DEBORAH GABOR
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101j1 - Mattress Fire Retardant

Regulations

2600.

101j.1. A bed with a solid foundation and fire retardant mattress that is in good repair, clean and supports the resident. A legal entity with a personal care home license for the home as of October 24, 2005, shall be exempt from the requirement for a fire retardant mattress.

Description of Violation

The mattress on the bed of #16A is torn and in extremely poor condition.

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 mattress of the bed of 16A was replaced on the day of the inspection. The Administrator +/or designee will make regular rounds of all resident rooms. Any mattress in worn or poor condition will be replaced as needed.

Legal Entity Representative

Deborah Gabor
Signature

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101J7 - Lighting/Operable Lamp

Regulations

2600.

101J.7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

Resident #6 does not have access to a source of light that can be turned on/off at bedside.

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.)

On the day of inspection, a lamp was placed in the room for resident #6.

The Administrator +/- or designee will make regular rounds of resident rooms to ensure that there is an operable lamp or light source for easy resident access.

Legal Entity Representative

Deborah Gabor
Signature

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