



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail: [vahrens@scsh.org](mailto:vahrens@scsh.org)

MAILING DATE: February 12, 2020

Ms. Vicky Ahrens  
Administrator  
Elizabeth Seton Care Center  
129 Depaul Center Road  
Greensburg, Pennsylvania 15601

RE: Elizabeth Seton Memory Care Center  
Certificate #: 445770

Dear Ms. Ahrens:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on October 3, 2019, of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read "Jason Williams".

Jason Williams  
Human Services Licensing Supervisor

Enclosure  
Licensing Inspection Summary

DEC 18 2019

## Violation Report

WEST REGION FIELD OFFICE  
Human Services Licensing

## Facility Information

Name: ELIZABETH SETON MEMORY CARE CENTER  
 Address: 129 DEPAUL CENTER ROAD,, GREENSBURG, PA 15601  
 County: WESTMORELAND Region: WESTERN

License Number: 44577

## Administrator

Name: VICKY AHRENS Phone: 7248537948 Email: VAHRENS@SCSH.ORG

## Legal Entity

Name: ELIZABETH SETON CARE CENTER  
 Address: 129 DEPAUL CENTER ROAD, GREENSBURG, PA, 15601

## Certificate(s) of Occupancy

Type: C-2 LP Date: 09/27/1999 Issued By: Dept. of Labor and Industry

## Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 22 Waking Staff: 17

## Inspection

Type: Full Reason: Renewal BHA Docket #: Notice: Unannounced

## Inspection Dates and Department Representative

10/03/2019 - On-Site: Jan Cutter, LAUREN SPAGNA

## Resident Demographic Data as of Inspection Dates

## General Information

License Capacity: 24 Residents Served: 11

## Secured Dementia Care Unit

In Home: Yes Area: ALL Capacity: 24 Residents Served: 11

## Hospice

Current Residents: 5

## Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 11  
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 11 Have Physical Disability: 0

132g - Fire Drills Days/Times

WEST REGION FIELD OFFICE  
Human Services Licensing

Regulations

2600.

132.g. Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

Description of Violation

The home routinely holds fire drills at the same time of the day as follows:

- \* 1/13/2019 at 3:14 pm
- \* 3/13/2019 at 2:30 pm
- \* 4/13/2019 at 3:16 pm
- \* 5/30/2019 at 3:15 pm
- \* 6/26/2019 at 3:15 pm

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.)

Met with maintenance manager regarding fire drill being timed to close together. He verbalized his understanding that they need to be scheduled at different times of the day and night, not routinely when additional staff are present. The administrator will monitor the times of drills to ensure compliance. Please see Attachment A pages 1-3 showing dates and times for fire drills.

Legal Entity Representative

*Vicky Ahrens*  
Signature

Vicky Ahrens, Administrator  
Printed Name and Title

12/18/19  
Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 2/6/2020  
(Date)

Plan of correction implementation status as of 2/6/2020  
(Date)

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

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

183d - Prescription Current

WEST REGION FIELD OFFICE  
Human Services Licensing

Regulations

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

A box of Bisacodyl Suppositories in the medication cart for resident #1 had an expiration date of 8/2019.

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.)

Medication expiration dates will be checked the third week of each month. Expired meds will be returned to the pharmacy for disposal and refill. A sign off sheet will be placed on the MAR for charge nurse or med tech to initial that they completed the expiration date med check the third week of each month. The administrator will routinely check the sign off sheet for compliance.

Please see Attachment B for Medication Date Check log.

The above medication was discarded at the time of inspection. *JW* 2/6/2020

Legal Entity Representative

*Vicky Ahrens*

Signature

Vicky Ahrens, Administrator

Printed Name and Title

12/18/19

Date

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233c - Key-Locking Devices

WEST REGION FIELD OFFICE  
Human Resources Building

Regulations

2600.

233.c. If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

Description of Violation

The code for operating the keypad locking mechanism is not conspicuously posted near the courtyard gate.

There was in incorrect code posted by the keypad locking mechanism by the exit door to the patio and by the main exit door to the lobby.

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 correct code was placed at all exits the day of inspection. The exit code was placed by the patio exit gate on the day of inspection. The administrator will routinely check to see if codes are correct and placed properly at exit doors and garden gate.

V  
at least monthly

*JW* 2/6/2020

Please see Attachment C for photos of keypad codes.

Legal Entity Representative

*Vicky Ahrens*  
Signature

Vicky Ahrens, Administrator  
Printed Name and Title

12/18/19  
Date

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