



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail: tdhthd@peoplepc.com

Mailing Date: February 27, 2020

Ms. Jean McVey
Administrator
Jean McVey
235 North Gallatin Avenue
Uniontown, Pennsylvania 15401

RE: McVey Personal Care Home
License #: 460240

Dear Ms. McVey:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on January 17, 2020, 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 "Janine Wenzig".

Janine Wenzig
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

FEB 17 2020

Violation Report

Facility Information

WEST REGION FIELD OFFICE
Human Services Licensing

License Number: 46024

Name: MCVEY PERSONAL CARE HOME
Address: 235 NORTH GALLATIN AVENUE,, UNIONTOWN, PA 15401
County: FAYETTE Region: WESTERN

Administrator

Name: Jean McVey Phone: 7244373235 Email:

Legal Entity

Name: JEAN MCVEY
Address: 235 NORTH GALLATIN AVENUE, UNIONTOWN, PA, 15401

Certificate(s) of Occupancy

Type: C-3 SP Date: 03/24/1992 Issued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 8 Waking Staff: 6

Inspection

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

Inspection Dates and Department Representative

01/17/2020 - On-Site: Josh Hoover

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 8 Residents Served: 8

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 6 Are 60 Years of Age or Older: 8
Diagnosed with Mental Illness: 2 Diagnosed with Intellectual Disability: 2
Have Mobility Need: 0 Have Physical Disability: 0

FEB 17 2020

20b1 - Financial Records

WEST REGION FIELD OFFICE
Human Services Licensing

Regulations

2600.

20.b. If the home provides assistance with financial management or holds resident funds, the following requirements apply:

- 1. The home shall keep a record of financial transactions with the resident, including the dates, amounts of deposits, amounts of withdrawals and the current balance.

Description of Violation

The home provides financial assistance to resident #1. Staff person A, the home's administrator, indicates she disbursed \$45.00 to resident #1 from his resident cash account during the week of 1/9/2020; however, this disbursement is not indicated on the resident's financial record.

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.)

In The Future Administrator Will make sure Residents with Financial Assistance Sign at the time there money is being disbursed

THE ADMINISTRATOR WILL REVIEW THE DISBURSEMENTS OF ALL RESIDENTS WHO RECEIVE FINANCIAL MANAGEMENT AT LEAST WEEKLY TO ENSURE ALL INFORMATION, INCLUDING RESIDENT SIGNATURES, IS PRESENT. - JRW 2/21/20

Legal Entity Representative

Jean McVey
Signature

Jean McVey administrator 2/17/20
Printed Name and Title Date

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The above plan of correction is approved as of 2/21/20 (Date) Plan of correction implementation status as of 2/21/20 (Date)

The above plan of correction was approved by (initials) Implemented Not Implemented

FEB 17 2020

83a - Indoor Temperature

WEST REGION FIELD OFFICE
Human Services Licensing

Regulations

2600.

83.a. The indoor temperature, in areas used by the residents, must be at least 70°F when residents are present in the home.

Description of Violation

At approximately 9:05a.m., the indoor temperature near the living room was 66 degrees Fahrenheit.

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.)

To prevent anyone being able to turn the thermostat down a Locked Box was installed.

THE ADMINISTRATOR OR DESIGNEE WILL MONITOR THE HOME'S TEMPERATURE DAILY TO ENSURE THE TEMPERATURE IN ALL AREAS IS AT LEAST 70 DEGREES FAHRENHEIT. - JRW 2/20/2020

Legal Entity Representative

Jean McVey
Signature

Jean McVey Administrator 2/17/20
Printed Name and Title Date

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01/17/2020

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89b - Hot Water Temperature

WEST REGION FIELD OFFICE
Human Services Licensing

Regulations

2600.

89.b. Hot water temperature in areas accessible to the resident may not exceed 120°F.

Description of Violation

At approximately 9:35a.m., the hot water temperature in the sink of the upstairs bathroom measured 132.9 degrees Fahrenheit.

At approximately 9:50a.m., the hot water temperature in the sink of the downstairs bathroom measured 129.5 degrees Fahrenheit.

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 WAS TURNED down the day of inspection. In the future STAFF will do a daily check to make sure it is no higher than 120°

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Signature

Jean McVey administrator 2/17/20
Printed Name and Title Date

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93b - Railings

WEST REGION FIELD OFFICE
Human Services Licensing

Regulations

2600.

93.b. Each porch must have a well-secured railing.

Description of Violation

The railing is missing on a portion of the lower deck, measuring approximately 35 linear feet. The deck height varies from approximately 4 feet from the ground an approximately 20 inches from the ground.

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 RAILING WAS ADDED TO THE LOWER DECK THAT WAS MISSING. IN THE FUTURE ADMINISTRATOR WILL MAKE SURE NO RAILINGS ARE MISSING.

Legal Entity Representative

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Signature

Jean McVey Administrator 2/17/20
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103e - Left Overs

Regulations

WEST REGION FIELD OFFICE
Human Services Licensing

2600.

103.e. Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

Description of Violation

There was an undated container of cooked chicken livers in the refrigerator.

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.)

FOOD WAS DATED AT TIME OF INSPECTION. - JRW 2/20/20.

In the future staff will make sure all containers are labeled and dated before they are placed in the refrigerator.

THE ADMINISTRATOR OR DESIGNEE WILL MONITOR FOOD STORAGE AT LEAST WEEKLY TO ENSURE ALL FOOD IS LABELED AND DATED WHEN OPENED. - JRW 2/20/2020

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103i - Outdated Food

Regulations

2600.
103.i. Outdated or spoiled food or dented cans may not be used.

Description of Violation

There was an open and unsealed bag of approximately 35 chicken nuggets in the freezer.

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.)

In the future staff will make sure all open bags are sealed before they are put back in the freezer.

THE ADMINISTRATOR OR DESIGNEE WILL MONITOR FOOD STORAGE AT LEAST WEEKLY TO ENSURE ALL FOOD IS SEALED. - JRW 2/20/2020

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187a - Medication Record

WEST REGION FIELD OFFICE
Human Services Licensing

Regulations

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

1. Resident's name.
2. Drug allergies.
3. Name of medication.
4. Strength.
5. Dosage form.
6. Dose.
7. Route of administration.
8. Frequency of administration.
9. Administration times.
10. Duration of therapy, if applicable.
11. Special precautions, if applicable.
12. Diagnosis or purpose for the medication, including pro re nata (PRN).
13. Date and time of medication administration.

Description of Violation

Resident #3 is ordered Quinapril 20mg, take 1 at bedtime for hypertension; however, this medication is not indicated on the resident's January 2020 medication administration record.

Repeat Violation: 1/22/2019

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.)

Resident #3 Quinapril for hypertension was added to the mar the day of inspection. In the future meds. will be triple checked when they are delivered monthly. by a designated staff member.

Legal Entity Representative

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Signature

Jean McVey Administrator 2/17/20
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01/17/2020

2/20/2020

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187a - Medication Record (continued)

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225c - Additional Assessment

Regulations

WEST REGION FIELD OFFICE
Human Services Licensing

2600.

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.

Description of Violation

The most recent assessment for resident #2 was completed on 9/24/2019; however, the previous assessment for resident #2 was completed on 8/13/2018.

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.)

In the future Administrator will make sure all assessment are completed within the time frame allowed. AT LEAST ANNUALLY. - JRW 2/20/2020

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Signature

Jean McVey Administrator 2/17/20
Printed Name and Title Date

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227a - Support Plan 30 Days

Regulations

WEST REGION FIELD OFFICE
Human Services Licensing

2600.

227.a. A resident requiring personal care services shall have a written support plan developed and implemented within 30 days of admission to the home. The support plan shall be documented on the Department's support plan form.

Description of Violation

The support plan for resident #3, dated 12/24/2019, does not address how the home will meet the resident's needs related to the diagnoses of schizophrenia and bipolar disorder, as indicated on the resident's assessment, dated 12/14/2019. These areas were blank.

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 ASSESSMENT FOR RESIDENT #3 UPDATED TO INCLUDE HOW THE HOME WILL MEET THE RESIDENT'S NEEDS. - JRW 2/20/2020

In The Future Administrator Shall make sure all Residents Needs related To Any diagnoses Are Not left blank

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