

Department of Human Services  
Bureau of Human Service Licensing

February 24, 2021

[REDACTED], ADMINISTRATOR  
ALBRECHT INC  
1710 MAPLE AVENUE  
COAL TOWNSHIP, PA 17866

RE: GUARDIAN ANGEL PERSONAL CARE  
HOME  
1710 MAPLE AVENUE  
COAL TOWNSHIP, PA, 17866  
LICENSE/COC#: 20208

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/02/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Anne Graziano

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Department of Human Services  
Bureau of Human Service Licensing  
LICENSING INSPECTION SUMMARY**

**Facility Information**

**Name:** GUARDIAN ANGEL PERSONAL CARE HOME      **License #:** 20208      **License Expiration Date:** 09/22/2020  
**Address:** 1710 MAPLE AVENUE, COAL TOWNSHIP, PA 17866  
**County:** NORTHUMBERLAND      **Region:** NORTHEAST

**Administrator**

**Name:** [REDACTED]      **Phone:** 5706447860      **Email:** [REDACTED]

**Legal Entity**

**Name:** ALBRECHT INC  
**Address:** 1710 MAPLE AVENUE, COAL TOWNSHIP, PA, 17866  
**Phone:** 5706447860      **Email:** [REDACTED]

**Certificate(s) of Occupancy**

**Staffing Hours**

**Resident Support Staff:** 0      **Total Daily Staff:** 19      **Waking Staff:** 14

**Inspection**

**Type:** Partial      **Notice:** Unannounced      **BHA Docket #:**  
**Reason:** Complaint      **Exit Conference Date:** 07/02/2020

**Inspection Dates and Department Representative**

07/02/2020 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 20      **Residents Served:** 19

**Secured Dementia Care Unit**

**In Home:** No      **Area:**      **Capacity:**      **Residents Served:**

**Hospice**

**Current Resident:** 0

**Number of Residents Who:**

**Receive Supplemental Security Income:** 16      **Are 60 Years of Age or Older:** 16  
**Diagnosed with Mental Illness:** 5      **Diagnosed with Intellectual Disability:** 9  
**Have Mobility Need:** 0      **Have Physical Disability:** 0

Inspections / Reviews

07/02/2020 - Partial

Lead Inspector: [REDACTED] Follow Up Type: *POC Submission* Follow-Up Date: *02/16/2021*

2/10/2021 POC Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *02/22/2021*

2/24/2021 - Document Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Not Required*

85b - Infestation

1. Requirements

2600.

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

Description of Violation

The home has a history of sporadic bed bug infestation for the several years. Multiple exterminators have attempted to exterminate the bed bugs and the home has spent large sums of money in attempting to eradicate the problem. In an interview with the current exterminator, the identifying problem is "clutter" in the resident's rooms. The exterminator is unable to get to all the hard to reach places. Until the home is decluttered, the bed bugs will not be thoroughly eradicated.

Plan of Correction

Accept

Rooms need to be decluttered to maintain sanitary conditions in the home. Bins were purchased for each resident to contain the clutter. Cleaning personnel went through each room with residents & organized & decluttered Exterminator comes and sprays on a monthly basis. Staff is responsible for checking & maintaining each room.

Completion Date: 07/10/2020

Update - 02/10/2021

Upon Resubmission of the Plan of Correction, the home will submit a checklist that is actually IN USE showing the auditing and maintaining of system to manage clutter.

The home will also retain receipts from their exterminator(s).

AG, 2-10-21

Document Submission

Implemented

Daily Clutter check has been in effect to maintain clutter

Update - 02/24/2021