

Department of Human Services
Bureau of Human Service Licensing

February 22, 2021

██████████ OWNER
ARK MANOR LLC
105 SANDRA DRIVE
DELMONT, PA 15626

RE: ARK MANOR
105 SANDRA DRIVE
DELMONT, PA, 15626
LICENSE/COC#: 44686

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/20/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Larry Mazza

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC

Facility Information

Name: ARK MANOR License #: 44686 License Expiration Date: 02/19/2022
Address : 105 SANDRA DRIVE, DELMONT, PA 15626
County: WESTMORELAND Region: WESTERN

Administrator

Name: [REDACTED] Phone: 7244686200 Email: [REDACTED]

Legal Entity

Name: ARK MANOR LLC
Address: 105 SANDRA DRIVE, DELMONT, PA, 15626
Phone: 7244686200 Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 06/23/2006 Issued By: Dept L&I

Staffing Hours

Resident Support Staff: Total Daily Staff: 51 Waking Staff: 38

Inspection

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint Exit Conference Date: 01/20/2021

Inspection Dates and Department Representative

01/20/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 70 Residents Served: 44

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 2

Number of Residents Who:

Receive Supplemental Security Income: 14 Are 60 Years of Age or Older: 38
Diagnosed with Mental Illness: 17 Diagnosed with Intellectual Disability: 2
Have Mobility Need: 7 Have Physical Disability: 0

Inspections / Reviews

01/20/2021 Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/06/2021

Inspections / Reviews (*continued*)

2/9/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow Up Type: *POC Submission*Follow-Up Date: *02/14/2021*

2/12/2021 POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *02/19/2021*

2/22/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

85e - Trash Outside Home

1. Requirements

2600.

85.e. Trash outside the home shall be kept in covered receptacles that prevent the penetration of insects and rodents.

Description of Violation

At 9:59 am, there were 2 half covered dumpsters filled with trash in the rear parking lot.

Plan of Correction

Directed

Maintenance will check dumpsters twice a week to ensure that they are covered

Sign placed by back door to remind staff to always close lids when putting stuff in dumpster

Administration will have a staff education with all staff on regulation 85.e and will be completed by 2/19/21

(DIRECTED: Documentation of the education shall be kept. LM 2/12/21).

Completion Date: 02/19/2021

Document Submission

Implemented

92 - Windows

1. Requirements

2600.

92. Windows and Screens - Windows, including windows in doors, must be in good repair and securely screened when doors or windows are open.

Description of Violation

The screen in the open window of the left door leading to the smoking area was torn on the bottom-right corner, and was not securely attached to the screen frame.

Plan of Correction

Accept

Screen was fixed on 2/1/21

Maintenance will checkscreens weekly to ensure that they are all secure and in good repair

Completion Date 02/01/2021

Document Submission

Implemented

100b - Removal Snow/Obstructions

1. Requirements

2600.

100.b. The home shall ensure that ice, snow and obstructions are removed from outside walkways, ramps, steps, recreational areas and exterior fire escapes.

100b - Removal Snow/Obstructions (continued)

Description of Violation

The following areas were covered with a thin layer of snow and ice:

- 9:39 am-the wooden deck outside of the emergency exit next to bedroom [REDACTED]
- 9:49 am-the emergency exit leading from the library area in wing 1 to the parking lot
- 10:15 am-the emergency exit leading from the sunroom to the front yard

Plan of Correction

Directed

Salt will be put outside all emergency exits when needed and snow shoveled when needed

Administrator will check the emergency exits upon arrival to ensure the salt was put down and that the areas are free from snow/ice. When Administrator is off, the Med Tech will check and make all areas safe

During inclement weather, staff will be educated that the supervisor on each shift will monitor the weather every hour while snowing/freezing rain and shovel/salt the emergency exits - Staff education on 100.b will be completed by 2/19/21. (DIRECTED: Documentation of the education shall be kept. LM 2/12/21).

Completion Date: 02/19/2021

Document Submission

Implemented

102k - No Common Towel

1. Requirements

- 2600.
- 102.k. Use of a common towel is prohibited.

Description of Violation

At 9:43 am, there was a used washcloth hanging on the grab bar in the left shower of the wing 2 common shower room.

Plan of Correction

Directed

Soiled washcloth was removed from the shower in wing 2 shower room on 1/20/21

Housekeeping will monitor shower rooms upon arrival and during cleaning day to ensure that no used/soiled towels are left in the common shower areas. AIDS are also aware of this regulation.

Administration will have a staff training with all employees on regulation 102.k and will be completed by 2/19/21. (DIRECTED: Documentation of the education shall be kept. LM 2/12/21).

Completion Date: 02/19/2021

Document Submission

Implemented

183b - Meds and Syringes Locked

1. Requirements

2600.

183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident s room.

Description of Violation

At 9:43 am, resident #1's Nystatin topical powder was unlocked and accessible to residents in the wing 2 common shower room.

REPEAT VIOLATION: 10/31/2019

Plan of Correction

Directed

Nystantin powder was removed from the wing 2 common shower room on 1/20/21

Med techs will monitor the shower rooms after showers to ensure no medications are left and that they get locked back in medication cart. Med techs will also be retrained individually by Administration by 2-19 on this regulation Daily monitoring by shift supervisor that all prescription medications/OTC medications/CAM and syringes are all in a locked area and not left out for anyone's reach - Staff traing will be completed by 2/19/21. (DIRECTED: Documentation of the education shall be kept. LM 2/12/21).

Completion Date: 02/19/2021

Document Submission

Implemented