

Department of Human Services
Bureau of Human Service Licensing

May 26, 2021

██████████ PERSONAL CARE ADMINISTRATOR
FORBES PERSONAL CARE LLC
180 SYLVAN AVENUE, SUITE 201
ENGLEWOOD CLIFFS, NJ 7632

RE: FORBES ROAD RESIDENCE
6655 FRANKSTOWN AVENUE
PITTSBURGH, PA, 15206
LICENSE/COC#: 44320

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/03/2021, 02/04/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Jason Williams

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: FORBES ROAD RESIDENCE **License #:** 44320 **License Expiration Date:** 05/15/2021
Address: 6655 FRANKSTOWN AVENUE, PITTSBURGH, PA 15206
County: ALLEGHENY **Region:** WESTERN

Administrator

Name: [REDACTED] **Phone:** 4126653165 **Email:** [REDACTED]

Legal Entity

Name: FORBES PERSONAL CARE LLC
Address: 180 SYLVAN AVENUE, SUITE 201, ENGLEWOOD CLIFFS, NJ, 7632
Phone: 4126653232 **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I-1 **Date:** 11/22/2002 **Issued By:** City of Pittsburgh

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 38 **Working Staff:** 29

Inspection

Type: Full **Notice:** Unannounced **BHA Docket #:**
Reason: Renewal **Exit Conference Date:** 02/04/2021

Inspection Dates and Department Representative

02/03/2021 - On-Site: [REDACTED]
 02/04/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 44 **Residents Served:** 38

Secured Dementia Care Unit

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

Hospice

Current Resident: 0

Number of Residents Who:

Receive Supplemental Security Income: 10 **Are 60 Years of Age or Older:** 33
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 1
Have Mobility Need: 0 **Have Physical Disability:** 0

Inspections / Reviews

02/03/2021 - Full

Lead Inspector: [REDACTED]

Follow Up Type: *POC Submission*Follow-Up Date: *03/12/2021*

3/25/2021 POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *03/29/2021*

3/29/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *04/02/2021*

5/26/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

42s - Privacy

1. Requirements

2600.

42.s. A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.

Description of Violation

There were no curtains, blinds or other window coverings to ensure resident privacy in the first shared bathroom on [REDACTED]

Plan of Correction

Accept

In an effort to remain within regulatory standards that ensure privacy of a residents self and possessions during bathing, dressing, changing, and medical procedures at all times. To provide this level of privacy, the blind in bathroom [REDACTED] was immediately replaced.

To keep up with this standard, a monitor will be in place that will require the administrator, Director of Nursing, or other designated staff will check for daily compliance with Regulation 2600.42s and making sure all blinds are in place, clean, and free from needed repair.

Completion Date: 02/04/2021

Document Submission

Implemented

See attached

51 - Criminal Background Check

1. Requirements

2600.

51. Criminal History Checks - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Description of Violation

Direct care staff person A, hired on [REDACTED] 9, did not have a criminal background check completed through the Pennsylvania State Police's "E-Patch" online system or completed on the Pennsylvania/State Police Request for Criminal Background Check form (SPF - 164).

Plan of Correction

Accept

During the hiring process, all staff, in accordance with regulation 2600.51, will have a criminal history check and other hiring policies completed that are in line with Older Adult Protective Services Act and 6 Pa. Code Chapter 15. While all of the background checks were completed within a timely manner and correct manner, the company we utilize did not provide a "E-Patch" on Staff member 1's criminal background check. Moving forward all background checks will be ordered and checked to ensure that it has the mandated "E-Patch" seal. After the company we ordered the background check through explained their process to us, Staff member 1 had a new background check completed 3/26/2021. Moving forward, all staff background checks, from both current and new staff, will be assessed for the correct seal. Those that are not in compliance with regulation 2600.51, will be completed again.

To remain in continued compliance with state regulation 2600.51, all background checks will be reviewed and double-checked upon receipt by HR and Administrator to ensure that the proper seal meets Older Adult Protective Services Act and state requirements.

Completion Date: 03/26/2021

51 - Criminal Background Check (*continued*)**Document Submission****Implemented***see attached*

85a - Sanitary Conditions

1. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

The shower curtain in the shared bathroom on [REDACTED] had rust stains covering the bottom 12 to 18 inches. In addition there were 4 brown 1 inch spots, about 3 feet up on the outside of the curtain.

The blinds in the window in the shared bathroom on [REDACTED] were completely covered with grimy dust.

The freezer compartment of the refrigerator/freezer in the lounge on [REDACTED] was specked with crumbs and debris. Also, there was a dried brown substance spread against the back wall of the compartment from one corner to the other.

There was no soap or paper towels in the bathroom shared by residents #2 and #3.

Plan of Correction**Accept**

In an effort to remain within compliance at all times with regulation 2600.85.a, sanitary conditions will be maintained at all times. To make sure of this, the shower curtain on [REDACTED] was replaced, the bathroom was sanitized and the blinds were replaced during survey. The freezer on [REDACTED] was also cleaned during survey along with the soap and paper towel being replaced during the survey.

To make certain that all rooms and shared areas are within state regulatory compliance, a monitor will be set in place to ensure that all spaces are checked every Monday, Wednesday, and Friday by the Administrator, Director of Nursing, or designated staff to keep said areas sanitary and safe for all residents.

Completion Date: 02/03/2021

Document Submission**Implemented***see attached*

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

There was no screen in the window in the first common bathroom on [REDACTED]

92 - Windows *(continued)***Plan of Correction****Accept**

Compliance will be maintained with regulation 2600.92 by making certain that all windows, whether in a door or not, will be in good repair and secure while window is opened or closed.

The screen for said window had to be measured and purchased by a specialty window firm. Measurements have been sent and our Director of maintenance is waiting for screen to arrive. Once the facility is in possession for screen it will be placed in window immediately.

Moving forward, a monitor will be in place that requires Administrator, Director of Nursing, or Designated Staff person will check all windows weekly to verify that all screens and windows are in good repair and secure with the window setting.

Completion Date 02/12/2021

Document Submission**Implemented**

see attached

101j7 - Lighting/Operable Lamp

1. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

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

Description of Violation

Residents #1, #2, #3, and #4 did not have access to a source of light that can be turned on/off at bedside.

Plan of Correction**Accept**

While all residents have lamps in their rooms that were placed on the nightstand at the time of move-in, said residents made the decision to move the lamps on their own. During the survey, all lamps were moved back to the nightstand and push lamps were placed on the nightstands as well.

To ensure that residents keep a proper light at the bedside, staff will do daily checks, Administrator, Director of Nursing, or designated staff will monitor.

Completion Date: 02/04/2021

Document Submission**Implemented**

see attached