

Department of Human Services
Bureau of Human Service Licensing

August 31, 2022

[REDACTED]
Tania Stevenson
[REDACTED]

RE: YOU FIRST PERSONAL CARE
337 FREDERICK STREET
HANOVER, PA, 17331
LICENSE/COC#: 33723

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/01/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Gloria Emick

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: *YOU FIRST PERSONAL CARE* License #: *33723* License Expiration:
Address: *337 FREDERICK STREET, HANOVER, PA 17331*
County: *YORK* Region: *CENTRAL*

Administrator

Name: [REDACTED] Phone: *347-301-4530* Email: [REDACTED]

Legal Entity

Name: *Tania Stevenson*
Address: *2200 BERNAYS DRIVE, YORK, PA, 17404*
Phone: *347-301-4530* Email: [REDACTED]

Certificate(s) of Occupancy

Type: *Other* Date: *11/30/2020* Issued By: *Borough of Hanover*

Staffing Hours

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

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Interim* Exit Conference Date: *06/01/2021*

Inspection Dates and Department Representative

06/01/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 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: *2* Are 60 Years of Age or Older: *6*
Diagnosed with Mental Illness: *5* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

06/01/2021 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *07/26/2021*

Inspections / Reviews (*continued*)

07/26/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *08/02/2022*

07/29/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *08/05/2022*

08/31/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

18 - Compliance With Laws

1. Requirements

2600.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

The home is heated with a boiler. The boiler has no current certificate of operation as required by the Pennsylvania Boilers and Unfired Pressure Vessels regulations (34 PA. Code Chapter 3).

Plan of Correction

Directed

(Directed)

The boiler was inspected by Labor and Industry on 9.28.21 and a new certificate was issued with an expiration date of 9.28.23. In order to maintain compliance with this regulation and ensure the boiler is inspected and certified every two years, the administrator will be responsible for contacting the appropriate inspection agency within 60 days prior to the certificate's expiration date to schedule the inspection. AS 7.29.22

Completion Date: 07/29/2022

Document Submission

Implemented

(Directed)

The boiler was inspected by Labor and Industry on 9.28.21 and a new certificate was issued with an expiration date of 9.28.23. In order to maintain compliance with this regulation and ensure the boiler is inspected and certified every two years, the administrator will be responsible for contacting the appropriate inspection agency within 60 days prior to the certificate's expiration date to schedule the inspection. AS 7.29.22

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 am, the medication cart was unlocked and accessible to residents in the living room.

Plan of Correction

Accept

Reminder sign placed at medication cart to remind medication administrators to lock the cart when not in use. Administrator and/or owner will check to see if med cart is locked during rounds randomly three times per week for one month. If med cart is found to be unlocked, med cart will be locked immediately and staff member on duty will be counseled about the importance of having med cart locked when not in use.

Completion Date: 08/30/2021

Document Submission

Implemented

Reminder sign placed at medication cart to remind medication administrators to lock the cart when not in use. Administrator and/or owner will check to see if med cart is locked during rounds randomly three times per week for one month. If med cart is found to be unlocked, med cart will be locked immediately and staff member on duty will be counseled about the importance of having med cart locked when not in use.