

Department of Human Services  
Bureau of Human Service Licensing

September 29, 2021

[REDACTED], COO  
[REDACTED]  
[REDACTED]  
[REDACTED]

RE: PAULA TEACHER & ASSOCIATES  
206 SAGERVILLE ROAD  
HARRISON CITY, PA, 15636  
LICENSE/COC#: 44816

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/27/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
[REDACTED]

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services  
Bureau of Human Service Licensing

September 24, 2021

[REDACTED], COO  
[REDACTED]  
[REDACTED]  
[REDACTED]

RE: PAULA TEACHER & ASSOCIATES  
206 SAGERVILLE ROAD  
HARRISON CITY, PA, 15636  
LICENSE/COC#: 44816

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 08/27/2021 of the above facility, the citations specified on the enclosed Licensing Inspection Summary (LIS) were found.

We have determined that your plan of correction is: Acceptable

All citations specified on the plan of correction must be corrected by the dates specified on the License Inspection Summary (violation report) and continued compliance with Department statutes and regulations must be maintained.

Sincerely,  
[REDACTED]

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: *PAULA TEACHER & ASSOCIATES* License #: *44816* License Expiration Date: *08/23/2022*  
Address: *206 SAGERVILLE ROAD, HARRISON CITY, PA 15636*  
County: *WESTMORELAND* Region: *WESTERN*

**Administrator**

Name: [REDACTED]

**Legal Entity**

[REDACTED]

**Certificate(s) of Occupancy**

Type: *R-4* Date: *09/21/2016* Issued By: *Township of Penn*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *10* Waking Staff: *8*

**Inspection**

Type: *Full* Notice: *Unannounced* BHA Docket #:  
Reason: *Renewal* Exit Conference Date: *08/27/2021*

**Inspection Dates and Department Representative**

*08/27/2021 - On-Site: Jan Cutter*

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *10* Residents Served: *10*

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *1*

**Number of Residents Who:**

Receive Supplemental Security Income: *5* Are 60 Years of Age or Older: *5*  
Diagnosed with Mental Illness: *10* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *0* Have Physical Disability: *1*

**Inspections / Reviews**

**08/27/2021 - Full**

Lead Inspector: *Jan Cutter* Follow-Up Type: *POC Submission* Follow-Up Date: *09/30/2021*

Inspections / Reviews (*continued*)

9/22/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *09/24/2021*

9/24/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *09/27/2021*

9/29/2021 - Document Submission

Lead 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 carbon monoxide detector in the men's laundry room was only 5 feet from the gas hot water heater.

Plan of Correction

Accept

Maintenance was contacted on August 30, and the detector was relocated 16 feet from the hot water tank. See attached photo.

Completion Date: 09/01/2021

Document Submission

Implemented

Documentation/photo of new location of detector submitted

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

The garbage can at the front door has a rectangular opening on each of its four sides allowing for the penetration of insects and rodents.

Plan of Correction

Accept

Trash can was removed and disposed of, and is no longer in use. See attachment.

All staff will be educated on keeping trash can lids closed. - [redacted] 9/22/21

Completion Date: 09/21/2021

Document Submission

Implemented

Documentation submitted. Staff re-educated of the requirement at staff meeting on Sept. 24, 2021.

225a - Assessment 15 Days

1. Requirements

2600.

- 225.a. A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

Description of Violation

Resident #1's assessment, dated [redacted], does not list the diagnoses of [redacted] and [redacted] [redacted], as indicated on the resident's medical evaluation, dated [redacted]

## 225a - Assessment 15 Days (continued)

**Plan of Correction****Accept**

The 2 diagnoses have been added to the RASP: History of [REDACTED].

Administrator will review and re-educate Program Coordinator and LPN on the inclusion of all medical and psychological diagnoses as documented on the medical evaluation. Administrator will review all residents' RASPs to ensure that both documents match and include all information.

**Completion Date:** 09/23/2021

**Document Submission****Implemented**

Program Coordinator and LPN met to discuss the problem. Administrator explained the reasoning for the corrective action. Attendance form attached. Administrator reviewed all other resident files to ensure all diagnoses appeared on both forms of documentation.

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

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08/27/2021 - On-Site: [REDACTED]

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Inspections / Reviews (*continued*)

9/22/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *09/24/2021*

9/24/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *09/27/2021*

9/29/2021 - Document Submission

Lead Reviewer: [REDACTED]

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## 225a - Assessment 15 Days (continued)

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