

Department of Human Services
Bureau of Human Service Licensing

May 16, 2022

[REDACTED], EXECUTIVE DIRECTOR

RE: CARITAS
2882 OLD PRINCETON ROAD
NEW CASTLE, PA, 16101
LICENSE/COC#: 44133

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/01/2022 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
LICENSING INSPECTION SUMMARY - PUBLIC

Facility Information

Name: *CARITAS* License #: *44133* License Expiration: *05/30/2022*
Address: *2882 OLD PRINCETON ROAD, NEW CASTLE, PA 16101*
County: *LAWRENCE* Region: *WESTERN*

Administrator

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

Legal Entity

[REDACTED]

Certificate(s) of Occupancy

Type: *R-4* Date: *07/09/2010* Issued By: *Code Consulting Inc.*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *11* Waking Staff: *8*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *02/01/2022*

Inspection Dates and Department Representative

02/01/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *11* Residents Served: *11*

Secured Dementia Care Unit

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

Hospice

Current Residents: *11*

Number of Residents Who:

Receive Supplemental Security Income: *11* Are 60 Years of Age or Older: *8*
Diagnosed with Mental Illness: *11* Diagnosed with Intellectual Disability: *2*
Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

02/01/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/05/2022*

02/28/2022 - POC Submission

Inspections / Reviews (*continued*)

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: *03/07/2022*

05/16/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

88a - Surfaces

1. Requirements

2600.

88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

At 10:30am in the common bathroom with a walk in shower, 2 ceramic tiles were ajar, approximately 1" from the wall, and with a light touch, were dislodged from the wall. The tiles were located approximately 12" above the floor on the right side shower wall entrance.

Plan of Correction

Accept

On 2/2/22 This administrator notified the HSC Maintenance Department. The ceramic tile in the bathroom with the walk-in shower was repaired on 2/3/22. In the future this administrator will check the tiles 1x per month to determine if the floors ceilings, windows, and other surfaces are clean and in good repair.

Completion Date: 02/03/2022

Document Submission

Implemented

Implemented 2/3/22

101r - Bedroom - shades/drapes/window covering

1. Requirements

2600.

101.r. There must be drapes, shades, curtains, blinds or shutters on the bedroom windows. Window coverings must be clean, in good repair, provide privacy and cover the entire window when drawn.

Description of Violation

4 slats were missing from the blinds on the left side window, closest to the bed in bedroom #10.

Plan of Correction

Accept

This administrator notified the HSC Maintenance Department concerning the broken mini blinds in room #10. The mini blinds were replaced. The resident was talked to related to destroying property when they are angry. This resident consented to drawing on better coping strategies when dealing with his anger. In the future this administrator will check bedrooms weekly to make certain windows and window dressings are up and intact.

Completion Date: 02/03/2022

Document Submission

Implemented

Implemented

225c - Additional Assessment

1. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

- 1. Annually.

Description of Violation

Resident #2's most recent assessment was completed on [REDACTED].

Plan of Correction

Accept

Upon learning that resident #2 did not have a current Assessment in the file this Administrator along with the

225c - Additional Assessment (continued)

resident completed the assessment and placed it in the resident's medical file on 2/10/22. In the future this administrator will inspect files to make certain assessments are completed annually and updated in the event that there have been changes in resident condition and or needs.

Completion Date: 02/10/2022

Document Submission

Implemented

Implemented