

Department of Human Services  
Bureau of Human Service Licensing

July 26, 2022

[REDACTED], PERSONAL CARE ADMINISTRATOR

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

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/01/2022, 06/02/2022 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

June 28, 2022

[REDACTED], PERSONAL CARE ADMINISTRATOR  
[REDACTED]  
[REDACTED]

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

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 06/01/2022, 06/02/2022 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: *FORBES ROAD RESIDENCE* License #: *44320* License Expiration: *05/15/2022*  
Address: *6655 FRANKSTOWN AVENUE, PITTSBURGH, PA 15206*  
County: *ALLEGHENY* Region: *WESTERN*

**Administrator**

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

**Legal Entity**

[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: *35* Waking Staff: *26*

**Inspection Information**

Type: *Full* Notice: *Unannounced* BHA Docket #:  
Reason: *Renewal* Exit Conference Date: *06/02/2022*

**Inspection Dates and Department Representative**

06/01/2022 - On-Site: [REDACTED]  
06/02/2022 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *44* Residents Served: *35*

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *1*

**Number of Residents Who:**

Receive Supplemental Security Income: *9* Are 60 Years of Age or Older: *32*  
Diagnosed with Mental Illness: *20* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *0* Have Physical Disability: *0*

## Inspections / Reviews

06/01/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/26/2022*

06/28/2022 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *07/01/2022*

07/26/2022 - Document Submission

Reviewer: [REDACTED] Follow-Up Type: *Not Required*

25c2 - Fee Schedule

1. Requirements

2600.

25.c. At a minimum, the contract must specify the following:

- 2. A fee schedule that lists the specify the following: actual amount of allowable resident charges for each of the home's available services.

Description of Violation

Resident #1's contract, dated [REDACTED], does not include the actual amount the resident will be charged per month for the home's available services.

Plan of Correction

Accept

In an effort to remain in compliance with regulation 2600.25.c and ensure that, at minimum, the contract specifies a fee schedule that lists the actual amount of allowable resident charges for each of the home's available services contracts will be reviewed by the administrator and designee prior to the resident move-in date and monitored monthly to ensure for completion and correctness.

Resident 1's contract was updated and corrected during the survey.

Completion Date: 06/20/2022

Document Submission

Implemented

In an effort to remain in compliance with regulation 2600.25.c and ensure that, at minimum, the contract specifies a fee schedule that lists the actual amount of allowable resident charges for each of the home's available services contracts will be reviewed by the administrator and designee prior to the resident move-in date and monitored monthly to ensure for completion and correctness.

Resident 1's contract was updated and corrected during the survey.

25c12 - Bed Hold

1. Requirements

2600.

25.c. At a minimum, the contract must specify the following:

- 12. Charges to the resident for holding a bed during hospitalization or other extended absence from the home.

Description of Violation

On 1/4/16, resident #1's contract, dated [REDACTED], does not include the amount the resident will be charged per day for holding a bed during hospitalization or other extended absences from the home.

Plan of Correction

Accept

To remain in compliance with regulation 2600.25.c, contracts have been updated to show what amount the resident will be charged per day for holding a bed during hospitalization or other extended absences from the home. The administrator and designee will check all contracts prior to the resident's move-in date to ensure completion and correctness.

Resident 1's contract was updated and completed during

Completion Date: 06/20/2022

Document Submission

Implemented

To remain in compliance with regulation 2600.25.c, contracts have been updated to show what amount the resident will be charged per day for holding a bed during hospitalization or other extended absences from the home. The

**25c12 - Bed Hold (continued)**

*administrator and designee will check all contracts prior to the resident's move-in date to ensure completion and correctness.*

*Resident 1's contract was updated and completed during*

**65i - Training Record****1. Requirements**

2600.

65.i. A record of training including the staff person trained, date, source, content, length of each course and copies of any certificates received, shall be kept.

**Description of Violation**

*The home's record of diabetic training on 9/30/21 does not include the content and length of the course.*

*The home has a record of training dated 3/10/22 that does not include the title of the course, location, content of course, training source and length of the course. Additionally, there is a record of training that does not include the title of the course, location, content of course, date, training source and length of the course. Both training records have multiple staff signatures*

*The home's record of CPR training for CPR on 4/30/22 does not include the content of the course, training source and length of the course.*

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

*To ensure that regulation 2600.65.i. remains in compliance, the administrator or designee will ensure that the record of training documents will include the staff persons trained, date, source, content, length of each course, and copies of any certificates received, shall be kept and will be monitored on the date of the training and monthly.*

*Training records were updated during the survey to ensure completion and compliance.*

**Completion Date:** 06/02/2022

**Document Submission****Implemented**

*To ensure that regulation 2600.65.i. remains in compliance, the administrator or designee will ensure that the record of training documents will include the staff persons trained, date, source, content, length of each course, and copies of any certificates received, shall be kept and will be monitored on the date of the training and monthly.*

*Training records were updated during the survey to ensure completion and compliance.*

**81b - Resident Personal Equipment****1. Requirements**

2600.

81.b. Wheelchairs, walkers, prosthetic devices and other apparatus used by residents must be clean, in good repair and free of hazards.

**Description of Violation**

*The wheelchair for resident #2 is in disrepair as follows, posing skin tear hazards:*

- The right armrest is missing completely leaving only the metal bar*
- The left armrest is almost completely detached from the metal bar and the vinyl on the left armrest is ripped, exposing*

81b - Resident Personal Equipment (continued)

the underlying foam

- The seat cushion is torn up, exposing approximately 50% of the foam on the top of the seat, and the entire front and left sides of the cushion

**Plan of Correction**

**Accept**

To maintain compliance with resident personal equipment and ensure that all wheelchairs, walkers, prosthetic devices, and other apparatus used by residents must be clean, in good repair, and free of hazards, the administrator or designee will create a monitor and do daily checks of all resident assistive devices.

Resident 2's wheelchair was replaced during the survey to ensure compliance was intact.

Completion Date: 06/02/2022

**Document Submission**

**Implemented**

To maintain compliance with resident personal equipment and ensure that all wheelchairs, walkers, prosthetic devices, and other apparatus used by residents must be clean, in good repair, and free of hazards, the administrator or designee will create a monitor and do daily checks of all resident assistive devices.

Resident 2's wheelchair was replaced during the survey to ensure compliance was intact.

85a - Sanitary Conditions

1. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

**Description of Violation**

On 6/2/22, there was mold and mildew covering approximately 22 inches x 18 inches of the bottom and approximately 4" up the sides of the bathtub in the shower room on 4A.

On 6/2/22, there was a used, unlabeled, white, wash cloth on the grab bar in the shower room on 4B.

On 6/2/22 11:00 a.m., there were no paper towels, mechanical air blower, individual cloth towels or other means of sanitary hand-drying in the bathroom of the shower room on 4B.

Repeat violation: 2/3/21

**Plan of Correction**

**Accept**

A daily monitor will be put in place and maintained by the administrator or their designee to make certain that regulation 2600.85. a. sanitary conditions shall be maintained and staff has been made aware of and educated on regulatory compliance needs.

During the survey, the 4B shower room was cleaned and the washcloth was removed. Paper towels were placed in 4A shower room, the 4B shower room has been deep cleaned and all mold/mildew was removed.

Completion Date: 06/02/2022

**Document Submission**

**Implemented**

A daily monitor will be put in place and maintained by the administrator or their designee to make certain that regulation 2600.85. a. sanitary conditions shall be maintained and staff has been made aware of and educated on regulatory compliance needs.

85a - Sanitary Conditions (continued)

During the survey, the 4B shower room was cleaned and the washcloth was removed. Paper towels were placed in 4A shower room, the 4B shower room has been deep cleaned and all mold/mildew was removed.

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

On 6/2/22 at 10:40 a.m., the 1st blue dumpster next to the home was uncovered and approximately 1/2 full of garbage bags and large pieces of cardboard.

Plan of Correction

Accept

The dumpster in question had its cover put in place during the inspection. To maintain continued compliance with regulation 2600.85.e., the administrator or director of maintenance will monitor the dumpster area to make sure that the trash outside of the home is kept covered in its receptacles to ensure the prevention of the penetration of insects and rodents

Completion Date: 06/02/2022

Document Submission

Implemented

The dumpster in question had its cover put in place during the inspection. To maintain continued compliance with regulation 2600.85.e., the administrator or director of maintenance will monitor the dumpster area to make sure that the trash outside of the home is kept covered in its receptacles to ensure the prevention of the penetration of insects and rodents

91 - Telephone Numbers

1. Requirements

2600.

91. Emergency Telephone Numbers - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

Description of Violation

On 6/2/22, none of the required telephone numbers were posted on or by the telephone in bedroom 2.

Plan of Correction

Accept

To make certain that regulation 2600.91 is maintained, a monitor will be put in place that requires the administrator or their designee to ensure that telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management, and personal care home compliant hotline shall be posted on or by each telephone with an outside line in both public areas and resident rooms.

Emergency telephone numbers have been placed in bedroom 2 in close proximity to the resident's phone.

Completion Date: 06/20/2022

Document Submission

Implemented

To make certain that regulation 2600.91 is maintained, a monitor will be put in place that requires the administrator or their designee to ensure that telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management, and personal care home compliant hotline shall be

**91 - Telephone Numbers (continued)**

*posted on or by each telephone with an outside line in both public areas and resident rooms.*

*Emergency telephone numbers have been placed in bedroom 2 in close proximity to the resident's phone.*

**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**

*On 6/2/22 in the stairwell on 2 West, there was no screen in the window and the window was open approximately 5".*

*Repeat violation: 2/3/21*

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

*To maintain compliance with regulation 2600.92, a daily monitor will be put in place that requires the administrator or their designee to ensure that all windows, including windows in doors, must be in good repair and securely screened when doors or windows are open.*

*Due to the age and size of the windows, the maintenance department is currently working on pricing and receipt of the properly sized screen for the 2West window.*

**Completion Date:** 06/20/2022

**Document Submission****Implemented**

*To maintain compliance with regulation 2600.92, a daily monitor will be put in place that requires the administrator or their designee to ensure that all windows, including windows in doors, must be in good repair and securely screened when doors or windows are open.*

*Due to the age and size of the windows, the maintenance department is currently working on pricing and receipt of the properly sized screen for the 2West window.*

**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**

*On 6/2/22, resident #3's bedside lamp was approximately 2 feet from the resident's bed and was unable to be turned off/on at bedside.*

*Repeat violation: 2/3/21*

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

*To maintain continued compliance with regulation 2600.101.j., a daily monitor will be put in place that makes certain that the administrator or their designee will check each resident's room for an operable lamp or another source of lighting that can be turned on at bedside.*

*Resident 3's lamp was moved closer to the bed during the survey.*

**Completion Date:** 06/20/2022

101j7 - Lighting/Operable Lamp (*continued*)**Document Submission****Implemented**

*To maintain continued compliance with regulation 2600.101.j., a daily monitor will be put in place that makes certain that the administrator or their designee will check each resident's room for an operable lamp or another source of lighting that can be turned on at bedside.*

*Resident 3's lamp was moved closer to the bed during the survey.*

## 101o - Walls, Floors, Ceilings

**1. Requirements**

2600.

101.o. The bedrooms must have walls, floors and ceilings, which are finished, clean and in good repair.

**Description of Violation**

*On 6/2/22, a large black stain, measuring approximately 30" by 15". on the carpeting directly next to the bed in bedroom 14.*

*On 6/2/22, the entire floor in bedroom 2 was sticky.*

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

*To ensure that all resident bedrooms have walls, floors, and ceilings, which are finished, clean, and in good repair, a daily monitor will be in place requiring the administrator or designee to check for compliance.*

*During the survey, bedroom number 2 had its floor mopped and cleaned and quotes to replace the carpet in resident room 14 are currently being sought.*

**Completion Date:** 06/20/2022

**Document Submission****Implemented**

*To ensure that all resident bedrooms have walls, floors, and ceilings, which are finished, clean, and in good repair, a daily monitor will be in place requiring the administrator or designee to check for compliance.*

*During the survey, bedroom number 2 had its floor mopped and cleaned and quotes to replace the carpet in resident room 14 are currently being sought.*

## 141b1 - Annual Medical Evaluation

**1. Requirements**

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

**Description of Violation**

*The medical evaluation, dated 4/6/22, for resident #4 is blank in the areas of height and pulse rate.*

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

*To maintain compliance with regulation 2600.141.b.1, a resident shall have a medical evaluation at least annually, all medical evaluations will be checked for completion upon receipt from the physician immediately and monthly thereafter by the administrator or their designee.*

**Completion Date:** 06/20/2022

141b1 - Annual Medical Evaluation (*continued*)**Document Submission****Implemented**

*To maintain compliance with regulation 2600.141.b.1, a resident shall have a medical evaluation at least annually, all medical evaluations will be checked for completion upon receipt from the physician immediately and monthly thereafter by the administrator or their designee.*

## 185a - Implement Storage Procedures

**1. Requirements**

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

**Description of Violation**

*On 6/1/22, a small, white, round tablet and 2 halves of an Isosorbide tablet were loose inside the 4A medication cart.*

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

*During the survey, all carts were cleaned thoroughly and the staff was educated on regulation 2600.185.a. to create compliance. Moving forward a daily monitor will be put in place requiring that administrator or the designee monitor and clean carts to create safe storage, access, security, distribution, and use of medications, and medical equipment by trained staff persons.*

**Completion Date:** 06/20/2022

**Document Submission****Implemented**

*During the survey, all carts were cleaned thoroughly and the staff was educated on regulation 2600.185.a. to create compliance. Moving forward a daily monitor will be put in place requiring that administrator or the designee monitor and clean carts to create safe storage, access, security, distribution, and use of medications, and medical equipment by trained staff persons.*