

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

April 3, 2023

[REDACTED]
MELODY MANOR PCH LLC
[REDACTED]

RE: MELODY MANOR
413 NORTH MCKEAN STREET
KITTANNING, PA, 16201
LICENSE/COC#: 44676

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/21/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: MELODY MANOR License #: 44676 License Expiration: 07/21/2023
 Address: 413 NORTH MCKEAN STREET, KITTANNING, PA 16201
 County: ARMSTRONG Region: WESTERN

Administrator

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

Legal Entity

Name: MELODY MANOR PCH LLC
 Address: 413 NORTH MCKEAN STREET, KITTANNING, PA, 16201
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 09/28/1987 Issued By: L&!

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 38 Waking Staff: 29

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Complaint Exit Conference Date: 07/21/2022

Inspection Dates and Department Representative

07/21/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 43 Residents Served: 36

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 2

Number of Residents Who:

Receive Supplemental Security Income: 14 Are 60 Years of Age or Older: 27
 Diagnosed with Mental Illness: 17 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 2 Have Physical Disability: 1

Inspections / Reviews

07/21/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 08/08/2022

10/06/2022 - POC Submission

Submitted By: [REDACTED] Date Submitted: 02/02/2023
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 10/13/2022

Inspections / Reviews *(continued)*

01/19/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/02/2023

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 02/02/2023

04/03/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/02/2023

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

25a - Written Contract and Review

1. Requirements

2600.

25.a. Prior to admission, or within 24 hours after admission, a written resident-home contract between the resident and the home shall be in place. The administrator or a designee shall complete this contract and review and explain its contents to the resident and the resident’s designated person if any, prior to signature.

Description of Violation

Resident #1, admitted [REDACTED], did not have a resident-home contract completed.

POC Submission

Directed (JW - 01/19/2023)

Administration was unaware of the process of admitting a respite resident. Administration read from the RCG and will continue to educate themselves on the regulations for admissions to a PCH. From this point forward, administration will ensure that every resident (respite care included) will have a contract in place immediately when coming to the home.

DIRECTED PLAN:

By 1/31/23: The administrator or desisgnee shall complete a resident-home contract for resident #1 (if the resident still lives in the home) and place the resident-home contract in the resident's record. JW 1/19/23

By 1/31/23: The administrator or desisgnee shall review all resident records to ensure each resident has a resident-home contract completed in its entirety. JW 1/19/23

Directed Completion Date: 01/31/2023

Implemented (BG - 04/03/2023)

41a - Complaint w/o Retaliation

2. Requirements

2600.

41.a. Upon admission, each resident and, if applicable, the resident’s designated person, shall be informed of resident rights and the right to lodge complaints without intimidation, retaliation, or threats of retaliation of the home or its staff persons against the reporter. Retaliation includes discharge or transfer from the home.

Description of Violation

Resident #1, admitted on [REDACTED], was not informed of resident rights and the right to lodge complaints without intimidation, retaliation, or threats of retaliation.

POC Submission

Directed (JW - 01/19/2023)

Administration is now aware that each resident, respite included, needs a contract. In our PCH's contract, it covers residents rights. Administration will ensure that every new resident is provided with a copy of their contract and explained what each section of it entails. Administration will provide this to every new resident immediately when they come to the home. A list of the resident's rights are also displayed throughout the home.

DIRECTED PLAN:

By 1/31/23: The administrator or desisgnee shall complete a resident-home contract for resident #1 (if the resident still lives in the home) and place the resident-home contract in the resident's record. JW 1/19/23

By 1/31/23: The administrator or desisgnee shall review all resident records to ensure each resident has a resident-home contract completed in its entirety. JW 1/19/23

41a - Complaint w/o Retaliation (continued)

Directed Completion Date: 01/31/2023

Implemented (BG - 04/03/2023)

51 - Criminal Background Check

3. 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

Staff member A, original date of hire [REDACTED] had a corresponding criminal history check completed on [REDACTED]. A break in employment service occurred on [REDACTED], until staff member A was rehired on [REDACTED]. However, no additional criminal history check was completed.

POC Submission

Directed (JW - 01/19/2023)

Administration will ensure that all hires, even if they are a re-hire, will have a new criminal background check completed before they start.

DIRECTED PLAN:

By 1/31/23: The administrator or designee shall apply for a PA State Police criminal history background check for staff person A. JW 1/19/23

By 1/31/23: The administrator or designee shall review all staff person records to ensure each staff person has a PA State Police criminal history background check completed in accordance with the Older Adult Protective Services Act and that documentation of the check is kept in the staff person's record. JW 1/19/23

Directed Completion Date: 01/31/2023

Implemented (BG - 04/03/2023)

54a - Direct Care Staff

4. Requirements

2600.

54.a. Direct care staff persons shall have the following qualifications:

- 2. Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry.

Description of Violation

Direct care staff member A does not have a high school diploma, GED, or active registry status on the Pennsylvania nurse aide registry.

POC Submission

Directed (JW - 01/19/2023)

Direct staff member A, does have a high school diploma/ GED. A copy of these items must be in [REDACTED] old employee file. Administration will ensure that a copy is found and put in [REDACTED] file immediately. Moving forward,

54a - Direct Care Staff (continued)

administration will ensure that every employee has a copy of these documents in their folder before they work any shift.

DIRECTED PLAN:

By 1/31/23: The administrator or designee shall review all direct care staff records to ensure each direct care staff person has a high school diploma, GED diploma or active registration status on the PA Nurse Aide Registry, and that documentation of these qualifications are kept in the staff persons' records. JW 1/19/23

Directed Completion Date: 01/31/2023

Implemented (BG - 04/03/2023)

224a - Preadmission Screen Form

5. Requirements

2600.

224.a. A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

Description of Violation

Resident #1, was admitted to the home on [REDACTED]; however, no preadmission screening form was completed.

POC Submission

Directed (JW - 01/19/2023)

Administration will continue to educate themselves on the admission process of a PCH, especially the regulations for a resident on respite care. Administration will ensure that each new respite care resident, has a pre-screen done before excepting them as an admission.

DIRECTED PLAN:

By 1/31/23: The administrator or designee shall educate all staff persons responsible for resident admissions on regulation 2600.224a and that this regulation applies to any resident that the home chooses to admit. Documentation of the education shall be kept. JW 1/19/23

By 1/31/23 and monthly thereafter: The administrator or designee shall review resident records to ensure that each resident has a preadmission screening completed in its entirety within 30 days prior to admission and placed in the resident's record. JW 1/19/23

Directed Completion Date: 10/14/2022

Implemented (BG - 04/03/2023)