



CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: MARCH 17, 2023

[Redacted]
Ark Manor LLC
105 Sandra Drive
Delmont, Pennsylvania 15626

RE: Ark Manor
105 Sandra Drive
Delmont, Pennsylvania 15626
License/COC #: 446862

Dear [Redacted]:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) licensing inspections on August 29, 2022, November 8, 2022, November 9, 2022, and November 10, 2022, of the above facility, the citations specified on the enclosed Licensing Inspection Summary (LIS) were found.

Based on violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), the Department hereby issues you a SECOND PROVISIONAL license to operate the above facility. A SECOND PROVISIONAL license is being issued based on your acceptable plan to correct the violations as specified on the LIS. This decision is made pursuant to 62 P.S. §1026 (b)(1) and 55 Pa. Code § 20.71(a)(2); (3); (4) (relating to conditions for denial, nonrenewal or revocation). Your SECOND PROVISIONAL license is enclosed and is valid from March 17, 2023 to September 17, 2023.

All violations specified on the LIS must be corrected by the dates specified on the report and continued compliance with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), must be maintained. Failure to implement the plan of correction or failure to maintain compliance may result in a revocation of the license.

Pursuant to 62 P.S. 1085-1087 and 55 Pa. Code § 2600.261-268 (relating to enforcement), the Department intends to assess a fine for the following violation(s) unless fully corrected on or before the mandated correction date.

55 Pa. Code Chapter 2600	Class of Violation	Census at Inspection	Fine Per resident X Per day	Calculated Fine = Per day	Mandated Correction Date (to avoid Fine)
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Section:

18	II	33	\$5	\$165	5 calendar days from mailing date of this letter
51	II	33	\$5	\$165	5 calendar days from mailing date of this letter
65(d)	II	33	\$5	\$165	5 calendar days from mailing date of this letter
85(a)	II	33	\$5	\$165	5 calendar days from mailing date of this letter
85(b)	II	33	\$5	\$165	5 calendar days from mailing date of this letter
85(e)	II	33	\$5	\$165	5 calendar days from mailing date of this letter
88(a)	II	33	\$5	\$165	5 calendar days from mailing date of this letter
100(a)	II	33	\$5	\$165	5 calendar days from mailing date of this letter
101(j)(7)	II	33	\$5	\$165	5 calendar days from mailing date of this letter
121(a)	II	33	\$5	\$165	5 calendar days from mailing date of this letter
130(g)	II	33	\$5	\$165	5 calendar days from mailing date of this letter
141(a)	II	33	\$5	\$165	5 calendar days from mailing date of this letter
141(b)(1)	II	33	\$5	\$165	5 calendar days from mailing date of this letter
183(b)	II	33	\$5	\$165	5 calendar days from mailing date of this letter
187(b)	II	33	\$5	\$165	5 calendar days from mailing date of this letter
187(d)	II	33	\$5	\$165	5 calendar days from mailing date of this letter
225(c)	II	33	\$5	\$165	5 calendar days from mailing date of this letter

A fine will be assessed daily beginning with the date of this letter and will continue until the violation is fully corrected, and full compliance with the regulation has been achieved. If the violation is fully corrected, and full compliance with the regulation has been achieved, by the mandated correction date, no fine will be assessed. You must notify the Department's Regional Human Services Licensing office in writing as soon as each violation is fully corrected and submit written documentation of each correction. The Department will conduct an on-site inspection after the mandated correction date, and within 20 calendar days of the date of this letter. If one or more violations is not fully corrected and full compliance with the regulation has not been achieved, you will periodically receive invoices from the Department's Bureau of Human Services Licensing with payment instructions. The fines will continue to accumulate until the violation is fully corrected and full compliance with the regulation has been achieved.

No fine is being assessed at this time; therefore, you may not appeal any fine at this time. If a violation is not corrected and full compliance with the regulation has not been achieved by the mandated correction date, a fine will be assessed and an invoice will be mailed. This invoice will contain the right to appeal the fine.

If you disagree with the decision to issue a PROVISIONAL license, you have the right to appeal through hearing before the Bureau of Hearings and Appeals, Department of Human Services in accordance with 1 Pa. Code Part II, Chapters 31-35. If you decide to appeal your PROVISIONAL license, a written request for an appeal must be received within 10 days of the date of this letter by:


Pennsylvania Department of Human Services
Bureau of Human Services Licensing
Room 631, Health and Welfare Building
625 Forster Street
Harrisburg, Pennsylvania 17120
PH: 717-214-1304

This decision is final 11 days from the date of this letter, or if you decide to appeal, upon issuance of a decision by the Bureau of Hearings and Appeals.

Sincerely,

Jamie F. Buchenauer

Jamie Buchenauer
Deputy Secretary
Office of Long-term Living

Enclosure
Licensing Inspection Summary

cc:

[REDACTED]

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

Facility Information

Name: *ARK MANOR* License #: *44686* License Expiration: *02/10/2023*
 Address : *105 SANDRA DRIVE, DELMONT, PA 15626*
 County: *WESTMORELAND* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *ARK MANOR LLC*
 Address: *105 SANDRA DRIVE, DELMONT, PA, 15626*
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *06/23/2006* Issued By: *Labor & Industry*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *33* Waking Staff: *25*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint, Fine* Exit Conference Date: *08/29/2022*

Inspection Dates and Department Representative

08/29/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *70* Residents Served: *31*

Secured Dementia Care Unit

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

Hospice

Current Residents: *1*

Number of Residents Who:

Receive Supplemental Security Income: *17* Are 60 Years of Age or Older: *26*
 Diagnosed with Mental Illness: *16* Diagnosed with Intellectual Disability: *4*
 Have Mobility Need: *2* Have Physical Disability: *0*

Inspections / Reviews

08/29/2022 - Partial

Lead Inspector [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *09/22/2022*

Inspections / Reviews (*continued*)

09/23/2022 - POC Submission

Submitted By: [REDACTED] Date Submitted: 10/10/2022
Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 09/27/2022

09/28/2022 - POC Submission

Submitted By: [REDACTED] Date Submitted: 10/10/2022
Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 09/30/2022

10/07/2022 - POC Submission

Submitted By: [REDACTED] Date Submitted: 10/10/2022
Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 10/10/2022

02/23/2023 - Document Submission

Submitted By: [REDACTED] Date Submitted: 10/10/2022
Reviewer: [REDACTED] Follow-Up Type: Enforcement

53a - Qualifications

1. Requirements

2600.

53.a. The administrator shall have one of the following qualifications:

1. A license as a registered nurse from the Department of State.
2. An associate's degree or 60 credit hours from an accredited college or university.
3. A license as a licensed practical nurse from the Department of State and 1 year of work experience in a related field.
4. A license as a nursing home administrator from the Department of State.
5. For a home serving 8 or fewer residents, a general education development diploma or high school diploma and 2 years direct care or administrative experience in the human services field.

Description of Violation

On 8/29/22 the home was serving 31 residents. Staff person A, the [REDACTED], does not have a license as a registered nurse from the Department of State. , an associate's degree or 60 credit hours from an accredited college or university, a license as a licensed practical nurse from the Department of State and 1 year of work experience in a related field or a license as a nursing home administrator from the Department of State.

The home's previous administrator left the position on 8/12/22.

POC Submission

Directed ([REDACTED] - 09/30/2022)

The home disputes this violation.

2600.56. states the administraor shall be present in the home on average of 20 hours or more per week, in each calendar month.

Former administrator, [REDACTED], worked 40 hours each week during the weeks of July 31, 2022 and August 7, 2022, totaling 80 hours. This would average 20 hours per each week in the month of August 2022.

a wavier was applied for on 9/9/2022. wavier attached

[REDACTED] is currently enrolled in westmoreland county community college to obtain 60 required credits. [REDACTED] is also enrolled in the personal care home administration program through [REDACTED] State and began classes 9/23/2022

Facility has startd the interiew and hiring processes. A new administrator will be hired by October 29, 2022 to work minimally of 20 hours per week

DIRECTED: By 10/21/22: The home will employ an administrator who meets the qualifications under 2600.53 and is present in the home at least an average of 20 hours per week, per calendar month, in accordance with regulation 2600.56. [REDACTED] 10/7/22

Licensee's Plan Completion Date:10/29/2022

Implemented ([REDACTED] - 02/23/2023)

85a - Sanitary Conditions

2. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

85a - Sanitary Conditions (continued)

Description of Violation

There was garbage, including 1 cup with an unknown, thick, blue liquid, 5 cups filled with beverages, two empty white cups, several empty medicine cups, a used Band-Aid and used Q-tips scattered on resident #1 's bedroom and bathroom floors. There was also a dark brown and yellow substance covering approximately 1/3 of the surface area and bowl of the bathroom sink.

Repeat violation: 2/15/22, 5/2/22

POC Submission

Accept (█) - 09/23/2022)

Because Resident #1 refusal to follow home rules, a 30 day notice has been issued. Resident #1 will be leaving the facility for alternative living arrangements on September 23, 2022.

Moving forward, staff will monitor sanitary conditions of the facility, including residents bedrooms. Any unsanitary conditions found will be corrected immediately upon findings. Documentation of monitoring will be kept for 3 months.

Licensee's Plan Completion Date: 09/22/2022

Not Implemented (█) - 02/23/2023)

85b - Infestation

3. Requirements

2600.

85.b. There may be no evidence of infestation of insects or rodents in the home.

Description of Violation

At 10:10 a.m. and throughout the day, there were approximately 12 flies swarming the middle of the room in bedroom █

POC Submission

Accept (█) - 09/26/2022)

Ehrlich pest controled contacted. Pest treatment done on 9/6/2022 and scheduled for routine returns. verification of visit attached.

Starting 9/27/2022, designated staff will monitor daily for reoccurrence of flies and pest control will be contacted if needs arise prior to their next scheduled treatment. Documentation of the daily checks will be kept x 3 months.

Licensee's Plan Completion Date: 09/26/2022

Not Implemented (█) - 02/23/2023)

181c - Self-administration Assessment

4. Requirements

2600.

181.c. The resident's assessment shall identify if the resident is able to self-administer medications as specified in § 2600.227(e) (relating to development of the support plan). A resident who desires to self-administer medications shall be assessed by a physician, physician's assistant or certified registered nurse practitioner regarding the ability to self-administer and the need for medication reminders.

Description of Violation

Resident #3 self-administers Albuterol Sulfate; however, █ has not been assessed by a physician, physician's assistant, or registered nurse practitioner regarding ability to self-administer medications and the need for medication reminders.

181c - Self-administration Assessment (continued)

POC Submission

Accept (█ - 09/26/2022)

Within 30 days of submission, administration will have physician assess any resident who desires to self-administer medications. Necessary changes will be made the resident's assessments as physician deems appropriate.

Resident #3 will be evaluated by █ PCP on █ next scheduled visit in the facility, 10/1/2022 to determine if resident is able to self administer albuterol. Resident #3's albuterol is currently in the medroom to be administered by DHS med tech's, as ordered by physician.

Licensee's Plan Completion Date: 09/26/2022

Implemented (█ - 02/23/2023)

183b - Meds and Syringes Locked

5. 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

There were two bottles of Biotin 10,000mcg rapid release soft gels and multiple, unidentifiable, tablets unlocked, unattended and accessible in several pill cups, as well as, loose on the top of resident #1's bedroom dresser.

Repeat Violation: 5/2/22

POC Submission

Accept (█ - 09/23/2022)

Because Resident #1 refusal to follow home rules, a 30 day notice has been issued. Resident #1 will be leaving the facility for alternative living arrangements on September 23, 2022.

Staff will be reeducated on 2600.183.b. on September 26, 2022 by administration. Documentation of education will be kept. Moving forward, staff will thoroughly check each day to be sure there are no medications left unlocked, in compliance with 2066.183.b. Documentation of daily monitoring will be kept for 3 months.

Licensee's Plan Completion Date: 09/22/2022

Not Implemented (█ - 02/23/2023)