

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

March 6, 2023

[REDACTED]
[REDACTED] JR
[REDACTED]

RE: TROSIEK'S PERSONAL CARE HOME
214 SECOND STREET
NEW SALEM, PA, 15468
LICENSE/COC#: 45026

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/13/2022 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: TROSIEK'S PERSONAL CARE HOME License #: 45026 License Expiration: 02/08/2023
 Address: 214 SECOND STREET, NEW SALEM, PA 15468
 County: FAYETTE Region: WESTERN

Administrator

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

Legal Entity

Name: MICHAEL M TROSIEK JR
 Address: P.O. BOX 535, NEW SALEM, PA, 15468
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-3 SP Date: 12/15/1986 Issued By: Labor & Industry

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 12 Waking Staff: 9

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
 Reason: Renewal, Complaint Exit Conference Date: 12/13/2022

Inspection Dates and Department Representative

12/13/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 13 Residents Served: 12

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 11 Are 60 Years of Age or Older: 9
 Diagnosed with Mental Illness: 12 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

12/13/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 01/02/2023

01/09/2023 - POC Submission

Submitted By: [REDACTED] Date Submitted: 02/17/2023
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 01/10/2023

Inspections / Reviews (*continued*)

01/30/2023 - POC Submission

Submitted By: [REDACTED] Date Submitted: 02/17/2023

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: 02/01/2023

03/06/2023 - Document Submission

Submitted By: [REDACTED] Date Submitted: 02/17/2023

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

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

There are no emergency telephone numbers to include the nearest hospital and fire department on or near the telephone in the living room.

Plan of Correction

Directed (JW - 01/30/2023)

The Administrator removed the phone that was located in the living room. In the future if there is another phone placed in the living room, the administrator will make sure that the Emergency Telephones Numbers are posted near all phones.

DIRECTED: Within 7 days of receipt of plan of correction - The administrator will check all telephones in the home to ensure all emergency phone numbers are posted nearby. - JW 1/30/23

Directed Completion Date: 01/27/2023

Implemented (JW - 03/06/2023)

141a - Medical Evaluation

2. Requirements

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission.

Description of Violation

Resident #1 was admitted to the home on [redacted]; however, the medical evaluation was completed on [redacted] more than 30 days after admission. Also, the evaluation does not include the resident's weight, pulse rate, temperature, blood pressure or a determination if the resident is able to self-administer medications.

Plan of Correction

Accept (JW - 01/30/2023)

Resident #1's medical evaluation was completed by the physician on [redacted] at Highlands Hospital prior to resident #1 coming to our facility. The original medical evaluation was in the resident's file and was overlooked by the inspector.

The only reason why the [redacted] medical evaluation was in resident #1 file was because Area on Aging requested an updated medical evaluation. The medical evaluation dated [redacted] was updated with all the information that was missing from it originally.

The Administrator will make sure that all future residents have a medical evaluation within 30 days after admission. Since the inspector missed the original medical evaluation, I do not think this should be a violation.

Licensee's Proposed Overall Completion Date: 01/27/2023

Implemented (JW - 03/06/2023)

225a - Assessment 15 Days

3. 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 include bladder management or bowel management.

Plan of Correction

Directed (JW - 01/30/2023)

Resident #1's assessment was updated to include bladder and bowel management. In the future the Administrator will make sure that all questions are completed on the initial assessment of all residents.

Directed Completion Date: 01/27/2023

Implemented (JW - 03/06/2023)
