



**CERTIFIED MAIL – RETURN RECEIPT
REQUESTED MAILING DATE: MARCH 24, 2023**

[REDACTED]
New Life Personal Care Home, Inc.
2521 Versailles Avenue
Mckeesport, Pennsylvania 15132

RE: New Life Personal Care Home
2521 Versailles Avenue
Mckeesport, Pennsylvania 15132
License/COC #: 431210

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) licensing inspections on September 7, 2022, and December 28, 2022, of the above facility, the violations specified on the enclosed Licensing Inspection Summary (LIS) were found.

As a result of violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), the Department hereby issues you a FIRST PROVISIONAL license to operate the above facility. A FIRST PROVISIONAL license is being issued based on your acceptable plan to correct the violations as specified on the LIS. The Department's decision to issue a FIRST PROVISIONAL license is based on the violations attached to this notice, your failure to comply with the Department's regulations, gross incompetence, negligence and misconduct in operating the facility, failure to submit an acceptable plan to correct noncompliance items, failure to comply with the acceptable plan of corrections, and is made pursuant to 62 P.S. § 1026 (b)(1); (4); 55 Pa. Code § 20.22(a); (b) (relating to reapplication) and § 20.71(a)(2); (3); (4) (relating to conditions for denial, nonrenewal or revocation).

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)
<u>Section:</u>					
85(a)	II	16	\$5	\$80	5 calendar days from mailing date of this letter
89(b)	II	16	\$5	\$80	5 calendar days from mailing date of this letter
101(j)(2)	II	16	\$5	\$80	5 calendar days from mailing date of this letter
101(j)(7)	II	16	\$5	\$80	5 calendar days from mailing date of this letter
102(i)	II	16	\$5	\$80	5 calendar days from mailing date of this letter
103(f)	II	16	\$5	\$80	5 calendar days from mailing date of this letter
141(b)(1)	II	16	\$5	\$80	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.

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.

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. Your appeal must indicate the reasons for the appeal, and you must be as specific as

decide to appeal, 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.

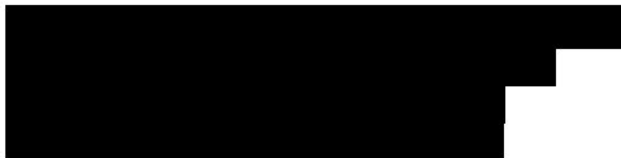
Sincerely,

Jamie F. Buchenauer

Jamie Buchenauer
Deputy Secretary
Office of Long-term Living

Enclosure
Licensing Inspection Summary

cc:



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

Facility Information

Name: *NEW LIFE PERSONAL CARE* License #: *43121* License Expiration: *10/27/2022*
Address: *2521 VERSAILLES AVENUE, MCKEESPORT, PA 15132*
County: *ALLEGHENY* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *NEW LIFE PERSONAL CARE HOME, INC.*
Address: *2521 VERSAILLES AVENUE, MCKEESPORT, PA, 15132*
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-1* Date: *06/01/2000* Issued By: *City of McKeesport*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *16* Waking Staff: *12*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Monitoring* Exit Conference Date: *12/28/2022*

Inspection Dates and Department Representative

12/28/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *18* Residents Served: *16*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *15* Are 60 Years of Age or Older: *16*
Diagnosed with Mental Illness: *16* Diagnosed with Intellectual Disability: *1*
Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

12/28/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *01/08/2023*

Inspections / Reviews (*continued*)

01/09/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/27/2023

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 01/13/2023

01/18/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/27/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission

Follow-Up Date: 01/31/2023

02/23/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/27/2023

Reviewer: [REDACTED]

Follow-Up Type: Enforcement

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

Residents #6 and #7 do not have an operable lamp or other source of lighting that can be turned on/off at bedside.

REPEAT VIOLATION: 6/28/2021

Plan of Correction

Directed [redacted] - 01/18/2023)

Both lamps were corrected on 1-6-23. The monthly checks began on 1-6-22. As of 1-10-23 the weekly checks will begin, and the progress to monthly. Thereafter the weekly checks will be building wide. (DIRECTED: Beginning on 1/20/23, then weekly thereafter: The administrator shall check each resident's bedroom to ensure each resident has an operable lamp or other source of lighting that can be turned on/off at bedside. [redacted] 1/18/23). The staff will be trained on the safety purpose of bed lights on 1-9-23, posting monitoring list for each floor started on 1-6-23 and completed on 1-9-23. (DIRECTED: Documentation of the education shall be kept. [redacted] 1/18/23).

Directed Completion Date: 01/20/2023

Not Implemented [redacted] - 02/23/2023)

141b1 - Annual Medical Evaluation

2. Requirements

2600.

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

Description of Violation

Resident #2's most recent medical evaluation, dated [redacted] does not include resident #2's weight, pulse rate, blood pressure, temperature, or a list medications. These sections of the evaluation are blank. Also, resident #2's medical evaluation does not include the date the medical professional completed the form.

Resident #3's most recent medical evaluation was completed on 3/18/21. Also, resident #3's medical evaluation, dated 3/18/21, does not include resident #3's immunization history, ability to self-administer medications, body positioning/movement, health status, cognitive functioning, mobility assessment or list of current medications. These sections of the evaluation are blank.

REPEAT VIOLATION: 6/28/2021

Plan of Correction

Directed ([redacted] - 01/18/2023)

Starting on 1-6-23 all medical evaluations will be observed and completed by doctor. Plan completed on 1-9-22 and then reviewed by administrator. This policy is for all medical evaluations.

DIRECTED: By 1/31/23: The medical evaluations for residents #2 and #3 shall be returned to the medical professional who completed the forms to be updated with the missing information. Copies of the completed medical evaluations shall be kept in resident #2 and #3's records. [redacted] 1/18/23.

141b1 - Annual Medical Evaluation (continued)

DIRECTED: BY 1/31/23: The administrator shall check all current resident records to ensure each resident has a medical evaluation, completed in its entirety, at least annually. Copies of the completed medical evaluations shall be kept in each resident's record. [REDACTED] 1/18/23.

DIRECTED: Beginning on 1/31/23: The administrator shall review each completed medical evaluation within 48 hours of completion to ensure each resident's medical evaluation is completed in its entirety. Copies of the completed medical evaluations shall be kept in each resident's record. [REDACTED] 1/18/23

Directed Completion Date: 01/31/2023

Not Implemented [REDACTED] - 02/23/2023)

186a - Authorized Prescriber

3. Requirements

2600.

186.a. Each prescription medication must be prescribed in writing by an authorized prescriber. Prescription orders shall be kept current.

Description of Violation

Resident #1 is prescribed the following medications; however, the home does not have copies of the current prescription orders for these medications:

- ♦ APAP Arthritis 650 mg-Take 2 tablets by mouth twice a day
- ♦ Aspirin EC 81mg-Take 2 tablets by mouth everyday
- ♦ Celecoxib 200mg-Take 1 tablet by mouth everyday
- ♦ Atorvastatin 20 mg-Take 1 tablet by mouth at bedtime

Plan of Correction

Directed [REDACTED] - 01/18/2023)

All of the prescriptions will be collected and stored in appropriate folders starting 1-6-23. The administrator will be responsible for the proper storage. After all doctor visits the folders will include the appropriate prescriptions and they will be secured. A monthly review of all folders will be conducted by administrator. That will be started and completed on 1-6-23.

DIRECTED: Within 72 hours of receipt of the plan of correction: The administrator shall contact resident #1's physician to obtain a copy of all of resident #1's current prescribed medications, including the current prescription for resident #1's APAP [REDACTED] 650 mg, Aspirin EC 81mg, Celecoxib 200mg and Atorvastatin 20 mg. Copies of all prescriptions shall be kept in resident #1's record. [REDACTED] 1/18/23

DIRECTED: By 1/31/23: The administrator shall review all current resident records to ensure copies of all current prescriptions are present in each resident's record. Any missing prescriptions shall be immediately obtained from the resident's physician and placed in each resident's record. [REDACTED] 1/18/23

Directed Completion Date: 01/31/2023

Not Implemented [REDACTED] - 02/23/2023)

187b - Date/Time of Medication Admin.

4. Requirements

187b - Date/Time of Medication Admin. (continued)

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

Resident #1 is prescribed the following medications. According to staff person A, the home's administrator, these medications have not been available in the home for administration for approximately 4 days; however, resident #1's December 2022 medication administration record (MAR) was initialed by staff persons indicating the medications were administered daily, including from 12/24/22 through 12/26/22:

- ◆ APAP ██████████ 650 mg-Take 2 tablets by mouth twice a day
- ◆ Aspirin EC 81mg-Take 2 tablets by mouth everyday
- ◆ Celecoxib 200mg-Take 1 tablet by mouth everyday
- ◆ Atorvastatin 20 mg-Take 1 tablet by mouth at bedtime

Residents #3, #4, and #5's December 2022 MAR's do not include the dates of medication administration.

Plan of Correction

Directed ██████████ - 01/18/2023)

All medication will be given as prescribed. All refused and discontinued prescriptions will be marked accordingly and not as given. Will be monitored weekly for a month and then monthly thereafter. This will be implemented 1-6-23. The plan was started on 1-6-23.

DIRECTED: By 1/25/23, then monthly thereafter: The administrator shall review all current resident MAR's, including the MAR's for residents #3, #4 and #5, to ensure the dates of medication administration are present on the MAR's. The reviews shall also ensure proper medication administration documentation on resident MAR's is present, and that only medications administered by staff persons are documented as administered on resident MAR's. ██████████ 1/18/23.

DIRECTED: By 1/25/23: All staff persons qualified to administer medications shall be re-educated on medication administration procedures, which includes only initialing resident MAR's for medications that are actually administered to residents. The re-education shall also include the home's documentation procedures for residents who refuse medications or for medications that are not present in the home for administration. Documentation of the education shall be kept. ██████████ 1/18/23.

Directed Completion Date: 01/25/2023

Not Implemented ██████████ - 02/23/2023)

187d - Follow Prescriber's Orders

5. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #1 is prescribed the following medications; however, according to staff person A, the home's administrator, these medications have not been available in the home for administration for approximately 4 days:

- ◆ APAP ██████████ 650 mg-Take 2 tablets by mouth twice a day

187d - Follow Prescriber's Orders (continued)

- Aspirin EC 81mg-Take 2 tablets by mouth everyday
- Celecoxib 200mg-Take 1 tablet by mouth everyday
- Atorvastatin 20 mg-Take 1 tablet by mouth at bedtime

Plan of Correction

Directed () - 01/18/2023)

All medications not given will be marked accordingly, and not as given. Beginning 1-6-23 all medications will be given as prescribed. The MAR'S will be monitored by med staff and administrator weekly for a month, then monthly thereafter. Plan was completed 1-9-23. MAR's corrected and sent from the doctor on 1-6-23. On 1-6-23 all MAR reviews will be conducted monthly for the completion of the form. All forms will be evaluated before leaving doctors office as of 1-9-23. The train the trainer will come in for reevaluation and training on medication administration on 1-17-23.

DIRECTED: Within 72 hours of receipt of the plan of correction: Unless discontinued in writing by the prescriber, the administrator shall ensure resident #1's APAP () 650 mg, Aspirin EC 81mg, Celecoxib 200mg and Atorvastatin 20 mg are present and available in the home for administration. () 1/18/23

DIRECTED: By 1/25/23, then monthly thereafter: The administrator shall review the medications for all residents to ensure all prescribed medications are present in the home and available for administration. () 1/18/23

DIRECTED: By 1/25/23: The administrator shall develop and implement procedures to ensure timely delivery of medications prior to depleting the current supply to ensure medications are available in the home for administration at all times in accordance with prescribers' orders. Documentation of the procedures shall be kept. All staff persons qualified to administer medications shall be educated on the new procedures by 1/31/23. Documentation of the education shall be kept. LM 1/18/23

Directed Completion Date: 01/31/2023

Not Implemented () - 02/23/2023)