



Emailing Date: May 4, 2023

[REDACTED]  
Perry South Personal Care Home LTD  
1129 Tweed Street  
Pittsburgh, Pennsylvania 15204

RE: Perry South Personal Care Home  
License #: 433730

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, licensing inspections on January 4, 2023, and April 13, 2023, the corrections you have made after our inspection, we have found the above facility to be in compliance with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes). Therefore, a regular license is being issued. Your license is enclosed.

Sincerely,

A handwritten signature in black ink that reads "Juliet Marsala". The signature is written in a cursive style.

Juliet Marsala  
Acting Deputy Secretary  
Office of Long-term Living

Enclosures  
License  
Licensing Inspection Summary

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

**Facility Information**

Name: *PERRY SOUTH PERSONAL CARE HOME* License #: *43373* License Expiration: *03/03/2023*  
Address: *1129 TWEED STREET, PITTSBURGH, PA 15204*  
County: *ALLEGHENY* Region: *WESTERN*

**Administrator**

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

**Legal Entity**

Name: *PERRY SOUTH PERSONAL CARE HOME LTD*  
Address: [REDACTED]  
Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *R-4* Date: *10/08/2008* Issued By: *City of Pittsburgh*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *6* Waking Staff: *5*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Provisional, Interim* Exit Conference Date: *04/13/2023*

**Inspection Dates and Department Representative**

04/13/2023 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *8* Residents Served: *6*

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *0*

**Number of Residents Who:**

Receive Supplemental Security Income: *3* Are 60 Years of Age or Older: *1*  
Diagnosed with Mental Illness: *6* Diagnosed with Intellectual Disability: *1*  
Have Mobility Need: *0* Have Physical Disability: *0*

**Inspections / Reviews**

**04/13/2023 - Partial**

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/06/2023*

Inspections / Reviews *(continued)*

04/26/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/26/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 05/01/2023

04/27/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/26/2023

Reviewer: [REDACTED]

Follow-Up Type: Exception

141b1 - Annual Medical Evaluation

1. Requirements

2600.

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

Description of Violation

Resident #1's most recent medical evaluation, dated 3/16/23, does not indicate the medical professional's name and the date the medical professional signed the evaluation.

REPEAT VIOLATION 6/1/2022

Plan of Correction

Accept (█) 04/26/2023

As of 4/14/2023, the administrator has requested the medical professional to update and include their name and date on the most recent medical evaluation, the administrator has received the updated information on the evaluation.

As of 4/14/2023, the administrator has checked all resident's medical evaluations to ensure that all medical evaluation sections have been filled out correctly, with no missing information. The administrator will double-check all new medical evaluations, along with having a staff member go over the evaluations to ensure that nothing was missed on the medical evaluations. once these checks are done the admin and staff member will sign a sheet to keep a record that all new medical evaluations have been checked properly.

Licensee's Proposed Overall Completion Date: 04/26/2023

Implemented (█) 04/27/2023