

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

October 18, 2023

[REDACTED]  
EVENING STAR LLC  
200 CALDWELL AVENUE  
WILMERDING, PA, 15148

RE: EVENING STAR PERSONAL CARE  
HOME  
200 CALDWELL AVENUE  
WILMERDING, PA, 15148  
LICENSE/COC#: 44715

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/12/2023 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: *EVENING STAR PERSONAL CARE HOME* License #: *44715* License Expiration: *12/05/2023*  
 Address: *200 CALDWELL AVENUE, WILMERDING, PA 15148*  
 County: *ALLEGHENY* Region: *WESTERN*

**Administrator**

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

**Legal Entity**

Name: *EVENING STAR LLC*  
 Address: *200 CALDWELL AVENUE, WILMERDING, PA, 15148*  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *Other* Date: *06/16/2016* Issued By: *Wilmerding Borough*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *17* Waking Staff: *13*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Complaint* Exit Conference Date: *09/12/2023*

**Inspection Dates and Department Representative**

09/12/2023 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *19* Residents Served: *15*

**Secured Dementia Care Unit**  
 In Home: *No* Area: Capacity: Residents Served:

**Hospice**  
 Current Residents: *0*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *2* Are 60 Years of Age or Older: *15*  
 Diagnosed with Mental Illness: *5* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *2* Have Physical Disability: *1*

**Inspections / Reviews**

09/12/2023 - Partial  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *09/29/2023*

10/02/2023 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: *10/18/2023*  
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/09/2023*

Inspections / Reviews *(continued)*

10/10/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/18/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 10/17/2023

10/18/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/18/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

## 42b - Abuse

**1. Requirements**

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

**Description of Violation**

On 9/12/23, the home rules posted in the living room, indicate the following: "Resident will begin getting up for the day about 6AM and to bed about 10P." However, resident interviews conducted indicated due to a recent event, the television in the common areas is turned off and all residents are to be in their rooms by 9:00 p.m. Interviews indicated they are not allowed to access the common area with or without the televisions on after 9:00 p.m. Interviews indicated if a resident gets up to use the bathroom or request something they are "shooed" back to their rooms afterward. The residents are not able to utilize the common areas after 9:00 p.m.

**Plan of Correction**

Accept [REDACTED] - 10/10/2023)

The PCHA reviewed 2600 42B. Abuse & Resident Rights

On 9/12/23 PCHA conducted interviews asking resident their preferences of going to bed. The interview concluded 12 Midnight as time that would accommodate all residents without going against their rights. See Attachment.

The interview log record will be stored by the PCHA

The PCHA educated residents on the new hours of sleep to be 12 Midnight and can also be changed as per their wishes.

The PCHA educated DCS of the new hours of sleep and also resident are allowed to access common areas.

On 9/13/23, PCHA posted a memo in a conspicuous area notifying residents and family the new hours of sleep.

The Memo will be posted for 30 Days. See attachment.

On 9/13/23, PCHA updated House Rules to indicate the new hours of sleep. See Attachment.

Starting 9/14/23 PCHA will conduct random interviews asking resident if DCS have asked to go to bed or access common areas before midnight or against their wish. Daily X 7 Days/ Weekly X 1 Month, Bi-Weekly X 1 Month then Monthly X 1 Month. See Attachment

A Staff meeting was held on 9/18/24 at 10 AM for 30 Mins. DCS was educated on the current inspection, deficiencies, one repeated violation and plan of correction. Documentation of the education shall be kept by PCHA. See Attachment.

On going education will be done monthly during quality assurance by the PCHA

New POC:-

The PCHA reviewed 2600 42B. Abuse & Resident Rights

On October 2nd 2023, PCHA made rounds, educated all residents that Evening Star PCH has no set of time for residents to go to bed.

All residents signed that they acknowledged the update.

On 10/2/2023, PCHA posted a memo in a conspicuous area notifying residents and family that home has no set of time for going to bed.

The Memo will be posted for 30 Days. See attachment.

On 10/2//23, PCHA updated House Rules to indicating home has no set of time for going to bed. See attachment

Starting 10/3/2023, PCHA will conduct random interviews asking resident if DCS have asked them to go to bed or not to access common area at any hour against their wish Daily X 7 Days/ Weekly X 1 Month, Bi-Weekly X 1 Month then Monthly X 1 Month. See Attachment

On 10/3/2023 DCS was educated by PCHA that home shall no longer has a set of time for residents to go to bed.

DCS signed to acknowledge this update.

42b - Abuse (continued)

On going education will be done monthly during quality assurance by the PCHA

Licensee's Proposed Overall Completion Date: 10/10/2023

Implemented [redacted] - 10/18/2023)

42q - Compensation

2. Requirements

2600.

42.q. A resident shall be compensated in accordance with State and Federal labor laws for labor performed on behalf of the home. Residents may voluntarily and without coercion perform tasks related directly to the resident's personal space or common areas of the home.

Description of Violation

On 9/13/23, resident interviews determined that staff persons of the home routinely require residents to make their own bed including putting clean linens on the bed. Resident #1 reported not wanting to make own bed, and was told by a staff person, "then it won't get made." The resident and other residents are not being compensated in accordance with state and Federal labor laws for labor performed on behalf of the home.

Plan of Correction

Accept [redacted] - 10/02/2023)

On 9/13/23 PCHA reviewed 2600. 42q-Compensation

On 9/13/23, PCHA made rounds educated each resident they are not required to perform any tasks such as making beds or any other at Evening Star. Resident signed a sheet of this notification and it will be stored by the PCHA. See Attachment

On 9/13/23 PCHA educated DCS that residents are not required, expected to perform tasks such as making beds. DCS signed a sheet of this notification and it will be stored by the PCHA. See Attachment.

9/13/23 a memo was posted in a conspicuous area stating no resident is required or expected to perform any tasks. The memo will be posted for 30 Days. See Attachment.

9/13/23 PCHA updated the house rules to state no resident is expected or required to perform any tasks. See attachment.

Starting 9/14/23 PCHA will conduct random interviews asking residents if DCS is asking or requiring them perform any tasks. Daily X 7 Days/ Weekly X 1 Month, Bi-Weekly X 1 Month then Monthly X 1 Month. See Attachment.

A Staff meeting was held on 9/18/24 at 10 AM for 30 Mins. DCS was educated on the current inspection, deficiencies, one repeated violation and plan of correction. Documentation of the education shall be kept by PCHA. See Attachment.

On going education will be done monthly during quality assurance by the PCHA

Licensee's Proposed Overall Completion Date: 09/29/2023

Implemented [redacted] - 10/18/2023)

103e - Left Overs

3. Requirements

2600.

103e - Left Overs (continued)

103.e. Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

**Description of Violation**

On 9/12/23, there were the following unlabeled and undated food items were in the kitchen refrigerator:

- Approximately 12 slices of yellow american cheese in saran wrap.
- Two pieces of left over birthday cake on a Styrofoam plate wrapped in saran wrap.

On 9/12/23, there were the following unlabeled and undated food items were in the small pantry in kitchen:

- Potato chips in a quart size zip lock baggie.
- Three 1-gallon Rubbermaid containers, one with elbow macaroni and white rice both approximately ¾'s full and uncooked spaghetti approximately a handful remaining.
- Two – full 6-quart plastic containers of cereal, Rice Krispie's, and Frosted Flake.
- One - 6-quart plastic container of cheerios, approximately ¼ full.

**Plan of Correction**

Accept [redacted] - 10/02/2023)

On 9/12/23 PCHA reviewed 2600. 103e

On 9/12/23 PCHA made rounds in both the fridge and freezer all unlabelled left overs were thrown away.

On 9/13/23, food containers and labels were provided to DCS. DCS educated to label, date & Initial leftovers

See attached photos.

Beginning 9/13/23, at the end of each shift DCS will make rounds and ensure all leftovers are well labelled, PCHA will verify task.

Attached is a log of food labelling per shift. See Attachment

Starting 9/14/23 PCHA will audit fridge and freezer to ensure left overs are labelled. Daily X 7 Days/ Weekly X 1 Month, Bi-Weekly X 1 Month then Monthly X 1 Month

A Staff meeting was held on 9/18/24 at 10 AM for 30 Mins. DCS was educated on the current inspection, deficiencies, one repeated violation and plan of correction. Documentation of the education shall be kept by PCHA. See Attachment.

On going education will be done monthly during quality assurance by the PCHA

Licensee's Proposed Overall Completion Date: 09/29/2023

Implemented ([redacted]) - 10/18/2023)

103g - Storing Food

**4. Requirements**

2600.

103.g. Food shall be stored in closed or sealed containers.

**Description of Violation**

On 9/12/23, there were the following open and unsealed food items in the kitchen refrigerator:

- An uncooked 5 Cheeses xtra large pizza with approximately ½ remaining in the pizza box that has an opening on the top and the cellophane over the pizza was open.
- An open unsealed plastic ice cream container with chocolate pudding being served for lunch.

On 9/12/23, there were the following open and unsealed food items in the small pantry in kitchen:

**103g - Storing Food (continued)**

- A 2 lb. bag of Pillsbury Flour, approximately, 1/4/ full.
- A 3.25 lb. carton of Idahoan Real Premium mashed potatoes.

REPEAT VIOLATION: 10/7/22

**Plan of Correction**

Accept [REDACTED] - 10/02/2023)

On 9/13/23 PCHA reviewed 2600. 103g

On 9/12/23 PCHA made rounds to all food storage basement/kitchen and ensured all foods were placed in close/sealed Ziplock bags & labeled.

Beginning 9/13/23 DCS will do rounds at the end of each shift & ensure all foods are sealed and labelled. A food flow sheet will stored by PCHA. See attached flow sheet.

Starting 9/14/23 PCHA will audit the food storage areas to ensure all foods are sealed and labelled. Daily X 7 Days/ Weekly X 1 Month, Bi-Weekly X 1 Month then Monthly X 1 Month. See Attachment.

A Staff meeting was held on 9/18/24 at 10 AM for 30 Mins. DCS was educated on the current inspection, deficiencies, one repeated violation and plan of correction. Documentation of the education shall be kept by PCHA. See Attachment.

A Staff meeting was held on 9/18/24 at 10 AM for 30 Mins. DCS was educated on the current inspection, deficiencies, one repeated violation and plan of correction. Documentation of the education shall be kept by PCHA. See Attachment.

On going education will be done monthly during quality assurance by the PCHA

Licensee's Proposed Overall Completion Date: 09/29/2023

Implemented [REDACTED] - 10/18/2023)

**162e - Menu Changes****5. Requirements**

2600.

162.e. A change to a menu shall be posted in a conspicuous and public place in the home and shall be accessible to a resident in advance of the meal. Meal substitutions shall be made in accordance with § 2600.161 (relating to nutritional adequacy).

**Description of Violation**

On 9/11/23, cold cut ham sandwich, minestrone soup and cookies were listed on the menu for dinner. However, pizza, salad and ice cream were served. The changes were not indicated on the menu and no notice was provided to the residents in advance of the meal.

**Plan of Correction**

Accept [REDACTED] - 10/02/2023)

On 9/13/23 PCHA reviewed 2600.162.e.

PCHA made rounds and educated residents home will no longer change menu, if otherwise, residents will be notified 2 hours in advance and change posted in conspicuous place.

On 9/13/23 A memo was posted by PCHA on conspicuous area stating home shall no longer change the menu. The memo will be posted for 30 Days. See Attachment.

On 9/13/23 DCS educated by the PCHA home will adhere to the posted menu, incase a change is needed to contact PCHA

**162e - Menu Changes (continued)**

DCS to note and ensure all foods are present morning and evening shift for 1 month. See attachment  
 PCHA will ensure all foods on the menu are present prior date. See attached menu log  
 Starting 9/14/23 PCHA will audit the menu. Daily X 7 Days/ Weekly X 1 Month, Bi-Weekly X 1 Month then Monthly  
 X 1 Month  
 A Staff meeting was held on 9/18/24 at 10 AM for 30 Mins. DCS was educated on the current inspection, deficiencies,  
 one repeated violation and plan of correction. Documentation of the education shall be kept by PCHA. See  
 Attachment.  
 On going education will be done monthly during quality assurance by the PCHA

Licensee's Proposed Overall Completion Date: 09/29/2023

Implemented [REDACTED] 10/18/2023)

**187a - Medication Record****6. Requirements**

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

1. Resident's name.
2. Drug allergies.
3. Name of medication.
4. Strength.
5. Dosage form.
6. Dose.
7. Route of administration.
8. Frequency of administration.
9. Administration times.
12. Diagnosis or purpose for the medication, including pro re nata (PRN).
13. Date and time of medication administration.
14. Name and initials of the staff person administering the medication.

**Description of Violation**

Resident #2 is prescribed the following medications; however, they are not included on resident #2's September 2023 Medication Administration Record (MAR), to include:

- Amlodipine Besylate 10mg - Take one tablet by mouth every day (7:00 a.m.).
- Hydrochlorothiazide 25mg tablet -Take one tablet one time a day (7:00 a.m.).
- Meloxicam 15 mg tablet – Take one tab once daily (7:00 a.m.).
- Vitamin B12 tablet – Take one tablet once daily (7:00 a.m.).

**Plan of Correction**

Accepted [REDACTED] - 10/02/2023)

On 9/13/23 PCHA reviewed 2600. 187.a.

On 9/12/23 PCHA contacted pharmacy to notify them of missing meds entry.

Immediately PCHA updated MAR to reflect the new meds. See Attachment.

On 9/13/23 PCHA audited 50% of MAR & Med Rolls and updated them accordingly. See Attachment

On 9/14/23 PCHA audited 50% of remaining MAR & Med Rolls and updated them accordingly. See Attachment

On 9/15/23 PCHA developed a New Med/MAR tracker and verifier. See Attachment

Starting 9/15/23 PCHA will audit MAR & Med Rolls Daily X 7 Days/ Weekly X 1 Month, Bi-Weekly X 1 Month then

**187a - Medication Record (continued)**

Monthly X 1 Month

A Staff meeting was held on 9/18/24 at 10 AM for 30 Mins. DCS was educated on the current inspection, deficiencies, one repeated violation and plan of correction. Documentation of the education shall be kept by PCHA. See Attachment.

On going education will be done monthly during quality assurance by the PCHA

Licensee's Proposed Overall Completion Date: 09/29/2023

Implemented [REDACTED] - 10/18/2023)