

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

November 21, 2023

[REDACTED], ADMINISTRATOR  
FCNRC LP  
911 DELAWARE STREET  
FOREST CITY, PA, 18421

RE: FOREST CITY PERSONAL CARE  
911 DELAWARE STREET  
FOREST CITY, PA, 18421  
LICENSE/COC#: 22349

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/04/2023, 10/05/2023, 10/16/2023 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]  
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: *FOREST CITY PERSONAL CARE* License #: *22349* License Expiration: *06/06/2024*  
 Address: *911 DELAWARE STREET, FOREST CITY, PA 18421*  
 County: *SUSQUEHANNA* Region: *NORTHEAST*

**Administrator**

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

**Legal Entity**

Name: *FCNRC LP*  
 Address: *911 DELAWARE STREET, FOREST CITY, PA, 18421*  
 Phone: *5707852273* Email: *JKasper@forestcitypc.com*

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *10/24/1994* Issued By: *L & I*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *25* Waking Staff: *19*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Interim* Exit Conference Date: *10/16/2023*

**Inspection Dates and Department Representative**

10/04/2023 - On-Site: [REDACTED]  
 10/05/2023 - Off-Site: [REDACTED]  
 10/16/2023 - Off-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: *36* Residents Served: *24*  
 Secured Dementia Care Unit  
 In Home: *No* Area: Capacity: Residents Served:  
 Hospice  
 Current Residents: *0*  
 Number of Residents Who:  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *22*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *1* Have Physical Disability: *0*

**Inspections / Reviews**

10/04/2023 - Partial  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *11/16/2023*

Inspections / Reviews (*continued*)

## 11/15/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/21/2023

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 11/20/2023

## 11/21/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/21/2023

Reviewer: [REDACTED]

Follow-Up Type: Bypass Document  
Submission

## 11/21/2023 - Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/21/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

## 103e - Left Overs

**1. Requirements**

2600.

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**

*A package of left over lunch meat, a bowl of chili, and a container of chicken noodle soup was in the refrigerator in the kitchen without a label and date. In the same refrigerator was a container labeled chicken biscuit and gravy without a date.*

**Plan of Correction**

Accept (█ - 11/21/2023)

*In response to the violation on 10/04/2023 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 10/04/2023 by the the cook to discard food items that did not include a label or date.*

*To enhance the currently compliant operations:*

- 1. on 10/18/2023 re-education was provided to the dietary staff including but not limited to, labeling and dating of leftovers and regulation 103e.*
- 2. Effective 11/06/2023 an audit will be conducted 3x weekly for 3 months of leftover food items to ensure items are labeled and dated, and discrepancies will be immediately corrected at that time. Auditing of leftover food items will be the responsibility of the dietary department, with a completion date of 02/09/2024.*
- 3. Effective 11/06/2023 auditing of leftover food item log will be reviewed by the administrator 3x weekly for 3 months to ensure compliance is being met, with a completion date of 02/09/2024.*

*The overall completion date is 02/09/2024.*

*Effective 11/06/2023 the dietary department will perform 3x weekly x3 months audits through 02/09/2024 to maintain ongoing compliance ensuring food served and returned from an individual's plate is not be served again or used in the preparation of other dishes, and ensure leftover food is labeled and dated. Any discrepancies will be corrected immediately, and findings will be documented and reported to the Administrator for further review and continuous improvement.*

**Licensee's Proposed Overall Completion Date: 02/09/2024**

Implemented (█ - 11/21/2023)

## 103h - Thawing Food

**2. Requirements**

2600.

103.h. Food shall be thawed either in the refrigerator, microwave, under cool water or as part of the cooking process.

**Description of Violation**

*3 bags of frozen pollock and a bag of frozen chicken thighs were defrosting on the counter in the kitchen.*

**Plan of Correction**

Accept (█ - 11/21/2023)

*In response to the violation on 10/04/2023 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 10/04/2023 by the the cook to discard items that were being thawed improperly.*

**103h - Thawing Food (continued)**

To enhance the currently compliant operations:

1. On 10/18/2023 education was provided to the dietary staff regarding regulation 103h and proper thawing techniques.
2. Starting on 11/13/2023 a daily audit of the menu and thawing process will be conducted x2 weeks, and then weekly x1 month to ensure proper thawing techniques are being maintained, with a completion date of 12/27/2023.

The overall completion date is 12/27/2023.

Effective 11/13/2023 the administrator will perform menu and food items thawing audits daily x2 weeks, and then weekly x1 month through 12/27/2023 to maintain ongoing compliance. Any discrepancies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 12/27/2023

Implemented [REDACTED] - 11/21/2023)

**103i - Outdated Food****3. Requirements**

2600.

103.i. Outdated or spoiled food or dented cans may not be used.

**Description of Violation**

6 bags of dinner rolls, 3 bags of chicken breasts and 2 bags of chopped chicken were in the home's freezer in the kitchen without a label and date.

**Plan of Correction**

Accepted [REDACTED] - 11/21/2023)

In response to the violation on 10/04/2023 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 10/04/2023 by the cook to discard improperly or unlabeled food items.

To enhance the currently compliant operations:

1. on 10/18/2023 re-education was provided to the dietary staff regarding regulation 103i.
2. Effective 11/08/2023 a weekly audit will be conducted of freezer items x3 months, to ensure freezer items are properly labeled and dated, any discrepancies will be immediately corrected.
3. Effective 11/21/23 a weekly food item review will be conducted weekly x2 months post food delivery to ensure food items being delivered are labeled and dated for compliance.

Effective 11/08/2023 the dietary department will perform weekly x3 month audit, through 02/08/2024 to maintain ongoing compliance. The administrator will review freezer item log weekly x3 months to ensure compliance is being met, and items are being properly labeled and dated. Effective 11/21/23 a weekly food item review will be conducted weekly x2 months post food delivery to ensure food items being delivered are labeled and dated for compliance. A random food item audit will be completed at the Administrator's discretion to ensure compliance is being maintained. Any discrepancies will be corrected immediately, and findings will be documented and reported to the Administrator for further review and continuous improvement.

Licensee's Proposed Overall Completion Date: 02/08/2024

103i - Outdated Food (*continued*)

Implemented (█) - 11/21/2023)

## 132a - Monthly Fire Drill

**4. Requirements**

2600.

132.a. An unannounced fire drill shall be held at least once a month.

**Description of Violation**

*Upon reviewing the fire alarm activity for the home as verified by the alarm activity report from First Alarm, the homes monitoring provider, there is no documentation that a fire drill was conducted in December 2022, April 2023 and May 2023.*

**Plan of Correction**

Accept (█) - 11/21/2023)

*In response to the violation on 10/04/2023 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 10/04/2023 by the administrator, and in result, Maintenance Man A is no longer an employee of the home.*

*To enhance the currently compliant operations:*

- 1. on 10/06/2023 a schedule of monthly fire drills was created, and unannounced monthly fire drills will occur per regulation 132a, conducted by the Maintenance Director.*
- 2. Effective on 10/06/2023 monthly fire drill records will be reviewed by the Administrator, and compared to alarm company reports for accuracy and compliance.*
- 3. Effective on 10/06/2023 the Administrator will obtain monthly reports from the alarm company for review and verification of compliance.*
- 4. The Maintenance Director was re-educated on chapter 2600 fire drill regulations on 11/17/23.*
- 5. The administrator will preform random staff and resident interviews after scheduled fire drill date, to ensure documented drills are being preformed.*
- 6. The Administrator has a mobile application provided by the alarm company where alarm activity logs can be reviewed remotely to monitor compliance.*

*Effective on 10/06/2023 the Maintenance Director will perform monthly fire drills to maintain ongoing compliance with holding an unannounced fire drill at least once a month, these drills will be reviewed by the administrator for compliance. A report from the alarm company will be obtained monthly by the administrator to ensure compliance is being maintained. The Administrator has a mobile app to monitor alarm activity remotely to ensure compliance is being maintained. The Administrator will preform random staff and resident interviews after reviewing documentation of fire drill, to ensure documented drills are being conducted.*

**Licensee's Proposed Overall Completion Date:** 12/04/2023

Implemented (█) - 11/21/2023)

## 132c - Fire Drill Records

**5. Requirements**

2600.

**132c - Fire Drill Records (continued)**

132.c. A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

**Description of Violation**

*A fire drill was recorded on the fire drill log as being conducted on 2-16-23 at 12:20pm. No alarm activity was noted on this date as referenced in the report of the alarm company First Alarm. The alarm was activated on 2-7-23 at 2:08pm. The information reported on the fire drill log does not capture the time and date the fire drill was held.*

*A fire drill was recorded on the fire drill log on 3-6-23 at 10:40am. There is no record the fire alarm was pulled on this date. The alarm was put on test and pulled on 3-7-23 at 2:37pm. The fire drill logs do not reflect the accurate fire drill date and time.*

*A fire drill was recorded on the home's fire drill log as being conducted on 4-17-23 at 2:15pm. There is no documentation that the fire alarm was pulled in the home anytime in April 2023 however the fire drill log notes a fire drill was conducted.*

*The fire drill log notes a fire drill was conducted on 5-19-23 at 9:42am. No fire alarm activity was noted on the monitoring companies report for May 2023, however information was recorded on the fire drill log that a fire drill was conducted.*

*The fire drill log noted a fire drill was conducted on 7-28-23 at 11:30pm. No fire alarm activity was noted on the monitoring company's report for this date however information regarding a fire drill being conducted was recorded on the fire drill log for the home.*

*The fire drill log notes a fire drill was conducted on 9-21-23 at 5:05am. Records from the home's alarm company show the alarm was pulled on 9-7-23 at 1:22pm. The data recorded in the fire drill log does not match the corresponding fire alarm activity report.*

**Plan of Correction****Accept (█ - 11/21/2023)**

*In response to the violation on 10/04/2023 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 10/04/2023 by the administrator, and in result, Maintenance Man A is no longer an employee of the home.*

*To enhance the currently compliant operations:*

- 1. On 10/06/2023 a schedule of monthly fire drills was created, and unannounced monthly drills will occur per regulation 132c, conducted by the Maintenance Director.*
- 2. Effective on 10/06/2023 monthly fire drill records will be reviewed by the Administrator, and compared to alarm company reports for accuracy and compliance.*
- 3. Effective on 10/06/2023 the Administrator will obtain monthly reports from the alarm company for review and verification of compliance.*
- 4. The Maintenance Director was re-educated on chapter 2600 fire drill regulations on 11/17/23.*
- 5. The administrator will preform random staff and resident interviews after scheduled fire drill date, to ensure documented drills are being preformed.*
- 6. The Administrator has a mobile application provided by the alarm company where alarm activity logs can be reviewed remotely to monitor compliance.*

## 132c - Fire Drill Records (continued)

Effective on 10/06/2023 the Maintenance Director will perform monthly fire drills to maintain ongoing compliance with holding an unannounced fire drill at least once a month. The Administrator will review monthly fire drills, and obtain a report from the alarm company to ensure documentation of drills is correct and compliance is being maintained. The Administrator has a mobile app provided by the alarm company for monitoring activity remotely. The Administrator will preform random staff and resident interviews after reviewing documentation of fire drill, to ensure documented drills are being conducted.

Licensee's Proposed Overall Completion Date: 12/04/2023

Implemented (█) - 11/21/2023)

## 132e - Fire Drill Sleeping Hours

## 6. Requirements

2600.

132.e. A fire drill shall be held during sleeping hours once every 6 months.

## Description of Violation

Through interviews with staff and residents, it was determined that no sleeping hour fire drill was conducted in the home in July 2023 or September 2023. Maintenance staff member A conducts the fire drills. He/she originally reported a drill was conducted on 7-28-23 at 11:30pm and 9-21-23 at 5:05am. Maintenance staff member A later reported to the licensing inspectors that sleeping hour fire drills were not conducted at the home as he/she previously reported.

## Plan of Correction

Accept (█) - 11/21/2023)

In response to the violation on 10/04/2023 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken:

1. After investigation and review of survey on 10/04/2023 Maintenance Man A to is no longer an employee of the home.
2. on 10/06/2023 an sleeping hour drill was conducted by the Maintenance Director.
3. on 10/06/2023 a sleeping hour drill was observed and documented by the administrator for compliance.

To enhance the currently compliant operations:

1. on 10/06/2023 the Administrator created a schedule of monthly fire drills, including a sleeping hour drill held once every 6 months as per regulation 132e.
2. Effective on 10/06/2023 monthly fire drill records will be reviewed by the Administrator, and compared to alarm company reports for accuracy and compliance.
3. Effective on 10/06/2023 the Administrator will obtain monthly reports from the alarm company for review and verification of compliance.
4. The Maintenance Director was re-educated on chapter 2600 fire drill regulations on 11/17/23.
5. The administrator will preform random staff and resident interviews after scheduled fire drill date, to ensure documented drills are being preformed.
6. The Administrator has a mobile application provided by the alarm company where alarm activity logs can be reviewed remotely to monitor compliance.

Effective on 10/06/2023 the Maintenance Director will perform monthly fire drills to maintain ongoing compliance

**132e - Fire Drill Sleeping Hours (continued)**

*with holding a sleeping hour fire drill every 6 months. The Administrator will review monthly fire drills, and obtain a report from the alarm company to ensure documentation of drills is correct and compliance is being maintained. The Administrator has a mobile app provided by the alarm company for monitoring activity remotely. The Administrator will preform random staff and resident interviews after reviewing documentation of fire drill, to ensure documented drills are being conducted.*

**Licensee's Proposed Overall Completion Date: 12/04/2023**

**Implemented (█ - 11/21/2023)**