

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

November 21, 2023

[REDACTED]
PARKER PERSONAL CARE INC
[REDACTED]

RE: PARKER PERSONAL CARE FACILITY
103 SEWARD STREET
PARKER, PA, 16049
LICENSE/COC#: 42656

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/22/2023 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: *PARKER PERSONAL CARE FACILITY* License #: *42656* License Expiration: *11/09/2023*
 Address: *103 SEWARD STREET, PARKER, PA 16049*
 County: *ARMSTRONG* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *PARKER PERSONAL CARE INC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-1* Date: *11/02/2011* Issued By: *Bureau Veritas North America, Inc.*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *37* Waking Staff: *28*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal* Exit Conference Date: *08/22/2023*

Inspection Dates and Department Representative

08/22/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *40* Residents Served: *35*

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

Hospice
 Current Residents: *3*

Number of Residents Who:
 Receive Supplemental Security Income: *1* Are 60 Years of Age or Older: *34*
 Diagnosed with Mental Illness: *15* Diagnosed with Intellectual Disability: *1*
 Have Mobility Need: *2* Have Physical Disability: *0*

Inspections / Reviews

08/22/2023 - Full
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *09/03/2023*

09/01/2023 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *10/24/2023*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *09/11/2023*

Inspections / Reviews *(continued)*

09/11/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/24/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 09/24/2023

11/21/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/24/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

18 - Compliance With Laws

1. Requirements

2600.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

The Care Facility Carbon Monoxide Alarms Standards Act, enacted 6/23/16, requires carbon monoxide alarms to be installed in close proximity of, but not less than 15 feet from, any fossil-fuel burning device or appliance. Carbon monoxide alarms were present in the home; however, the carbon monoxide alarm, closest to the basement gas furnace, was only 10 feet from the furnace. This is not in accordance with The Care Facility Carbon Monoxide Alarms Standards Act.

Plan of Correction

Accept ([redacted] - 09/11/2023)

On 08/22/23, Maintenance immediately removed the carbon monoxide alarm.

On the following day, 08/23/23, an alarm was placed above the basement door (where the water heater is located).

Maintenance was advised to check the alarm weekly for operability on 08/23/23.

Licensee's Proposed Overall Completion Date: 09/01/2023

Implemented [redacted] - 11/21/2023)

101j7 - Lighting/Operable Lamp

2. 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

The bedside lamp, belonging to resident #1, was inoperable, as it was unplugged from the wall.

Plan of Correction

Accept [redacted] - 09/11/2023)

Immediately on 08/22/23 the lamp was plugged in and guaranteed to be operable.

Administrator spoke with Housekeeping and Maintenance on 08/23/23; on a daily basis all rooms will be checked every morning for operable and accessible lighting at bedside.

Staff have been educated on 08/22/23 by the Administrator to check bedside lamps prior to the bedtime hour daily as well.

Licensee's Proposed Overall Completion Date: 09/01/2023

Implemented [redacted] - 11/21/2023)

123c - Evacuation Diagrams

3. Requirements

2600.

123.c. For a home serving nine or more residents, an emergency evacuation diagram of each floor showing corridors, line of travel to exit doors and location of the fire extinguishers and pull signals shall be posted in a conspicuous and public place on each floor.

123c - Evacuation Diagrams (continued)**Description of Violation**

The emergency evacuation diagram, posted in the dining room, does not indicate the location of the home's fire extinguishers nor the location of the home's pull stations.

Plan of Correction**Accept** [REDACTED] - 09/11/2023)

Immediately on 08/22/23 the evacuation diagram posted in the dining room was revised to reflect the location of the fire extinguishers and pull stations.

Maintenance checked all other diagrams to ensure documentation of all diagrams in the facility on 08/22/23.

If there is a need to place additional diagrams, Administrator directed maintenance on 08/23/23 to ensure complete documentation of fire extinguishers and pull signals.

Licensee's Proposed Overall Completion Date: 09/01/2023

Implemented [REDACTED] - 11/21/2023)