

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

December 12, 2023

[REDACTED]
RUTH M. SMITH CENTER
[REDACTED]
[REDACTED]

RE: RUTH M. SMITH CENTER
407 SOUTH MAIN STREET
SHEFFIELD, PA, 16347
LICENSE/COC#: 44596

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/07/2023 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: *RUTH M. SMITH CENTER* License #: *44596* License Expiration: *01/31/2024*
 Address: *407 SOUTH MAIN STREET, SHEFFIELD, PA 16347*
 County: *WARREN* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *RUTH M. SMITH CENTER*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *Other* Date: *02/06/1986* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *10* Waking Staff: *8*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal* Exit Conference Date: *11/07/2023*

Inspection Dates and Department Representative

11/07/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *15* Residents Served: *10*

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

Hospice
 Current Residents: *0*

Number of Residents Who:
 Receive Supplemental Security Income: [REDACTED] Are 60 Years of Age or Older: [REDACTED]
 Diagnosed with Mental Illness: [REDACTED] Diagnosed with Intellectual Disability: [REDACTED]
 Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

11/07/2023 - Full
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *12/04/2023*

Inspections / Reviews (*continued*)

12/07/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/11/2023

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 12/30/2023

12/12/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/11/2023

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

85e - Trash Outside Home

1. Requirements

2600.

85.e. Trash outside the home shall be kept in covered receptacles that prevent the penetration of insects and rodents.

Description of Violation

The dumpster left-side lid was open, and the dumpster was approximately 1/2 full with trash.

Plan of Correction

Accepted [redacted] - 12/07/2023)

The Administrator shut the dumpster lid immediately during inspection on [redacted].

All staff will be retrained on regulation 2600.85.e on [redacted] by the Administrator.

On [redacted] the Office Manager ordered a decal sticker that reads, "Keep Dumpster Lid Shut". It will be placed on the dumpster by Maintenance when it arrives.

Maintenance will check upon arriving to work at 8am and before leaving work at 4pm to be sure the dumpster lid is kept closed beginning [redacted].

The Administrator will check monthly for compliance beginning [redacted].

Licensee's Proposed Overall Completion Date: 12/01/2023

Implemented [redacted] - 12/12/2023)

103f - Refrigerator/Freezer Temps

2. Requirements

2600.

103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

Description of Violation

At [redacted] the temperature in the freezer in the kitchen was 10 degrees Fahrenheit and, at [redacted] after moving the thermometer farther back in the freezer, it was 10 degrees Fahrenheit.

Plan of Correction

Accepted [redacted] - 12/07/2023)

Administrator adjusted the freezer temperature immediately during inspection on [redacted]. Temperature was -4 degrees at 4pm on [redacted].

All staff was retrained on Regulation 2600.103.f. on [redacted] by the Administrator.

All staff was retrained by the Administrator on how to check freezer / fridge temperature and how to adjust the temperature on [redacted].

A column was added by the Administrator to the daily fridge / freezer temperature sheets for rechecks of temperature as needed on [redacted]. Staff will use the new form beginning [redacted].

The Building Supervisor will check the temperature chart daily beginning [redacted] and weekly thereafter beginning [redacted].

The Administrator will check for compliance monthly beginning [redacted].

Licensee's Proposed Overall Completion Date: 12/01/2023

Implemented [redacted] - 12/12/2023)

103g - Storing Food

3. Requirements

2600.
103.g. Food shall be stored in closed or sealed containers.

Description of Violation

The 10-pound bag of sugar in the kitchen was opened and unsealed.

Plan of Correction

Accepted [redacted] - 12/07/2023)

The Building Supervisor sealed the bag of sugar immediately during inspection on [redacted] with tape. The Administrator purchased a seal tight container to store the sugar in on [redacted]. All staff was retrained on Regulation 2600.103g by the Administrator on [redacted]. A sign was posted in the kitchen by the Administrator on [redacted] reminding staff to store all food in closed or sealed containers.

Check that food is stored in closed or sealed containers will be added to personal care aide's daily task sheets by the Office Assistant beginning [redacted].

"Check that food is stored in sealed containers" will be added to the Building Supervisor's weekly task sheet by the Office Assistant beginning [redacted].

The Administrator will check for compliance monthly beginning [redacted].

Licensee's Proposed Overall Completion Date: 12/01/2023

Implemented [redacted] - 12/12/2023)

162c - Menus Posted

4. Requirements

2600.
162.c. Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

Description of Violation

The home's menu for the current week of [redacted] was posted. However, the advanced week menu for [redacted] was not posted in the home.

Plan of Correction

Accepted [redacted] - 12/07/2023)

A menu was completed by the Cook on [redacted] and posted by the Administrator on [redacted] at 4pm. All Staff will be retrained on Regulation 2600.162.c. on [redacted] by the Administrator.

The Office Assistant added, "menu is posted one week in advance" to the kitchen daily task sheet beginning [redacted].

The Office Assistant added, "menu is posted one week in advance" to the Building Supervisor's weekly task sheet beginning [redacted].

The Administrator will check for compliance monthly beginning [redacted].

Licensee's Proposed Overall Completion Date: 12/01/2023

Implemented [redacted] - 12/12/2023)

185a - Implement Storage Procedures

5. Requirements

2600.

185a - Implement Storage Procedures (continued)

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident #2 is prescribed [REDACTED], give [REDACTED] every 12 hours as needed. However, this medication was not available in the home.

Plan of Correction

Accepted [REDACTED] - 12/07/2023)

The Building Supervisor immediately after inspection on [REDACTED] called Resident's #2 physician to have the [REDACTED] discontinued.

On [REDACTED] Resident's #2 physician faxed the discontinued order to the Building Supervisor.

On [REDACTED] the Building Supervisor discontinued the Delsym 30mg/5ml in the MAR.

The Administrator reviewed the MARS on [REDACTED] for accuracy.

All staff was retrained on Regulation 2600.185.a on [REDACTED] by the Medication Administration Trainer.

All staff was retrained on the Ruth M. Smith Center Medication Administration Policy and Procedures on [REDACTED] by the Medication Administration Trainer.

The Building Supervisor will review the MARS weekly for accuracy beginning [REDACTED].

The Administrator will review the MARS monthly for accuracy beginning [REDACTED].

Licensee's Proposed Overall Completion Date: 12/01/2023

Implemented [REDACTED] - 12/12/2023)