



CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: April 3, 2024

[REDACTED]
[REDACTED]
TLC Healthcare, LLC
[REDACTED]
[REDACTED]

RE: Dunlevy Manor
2218 Route 88
Dunlevy, Pennsylvania 15432
License #: 44754

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department), licensing inspections on March 18, 2024 and March 22, 2024 of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Licensing Inspection Summary were found.

Correction of these violations in accordance with the specified plan of correction is required. Failure to correct the violations may result in further licensing enforcement action.

Sincerely,

A handwritten signature in black ink that reads "Juliet Marsala".

Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosure
Licensing Inspection Summary

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

Facility Information

Name: *DUNLEVY MANOR* License #: *44754* License Expiration: *02/05/2023*
Address: *2218 ROUTE 88, DUNLEVY, PA 15432*
County: *WASHINGTON* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *TLC HEALTHCARE LLC*
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *06/20/1996* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *13* Waking Staff: *10*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint, Monitoring* Exit Conference Date: *03/22/2024*

Inspection Dates and Department Representative

03/18/2024 - On-Site: [REDACTED]
03/22/2024 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *24* Residents Served: *8*

Secured Dementia Care Unit

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

Hospice

Current Residents: *5*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *8*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *5* Have Physical Disability: *0*

Inspections / Reviews

03/18/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *Enforcement*

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. The home has a gas furnace and a gas hot water heater in the main hallway. Also, section 3(b)(3) of the Pennsylvania Care Facility Carbon Monoxide Alarms Standards Act indicates: The battery shall be labeled with the date of installation and replaced at least once annually or at such time as the unit signals a drained or failing battery, whichever is sooner.

On 3/18/24, at approximately 9:15 a.m., the first alert carbon monoxide detector in the hallway next to bedroom #11, did not have batteries installed, therefore, the device is inoperable.

Repeat Violation: 2/29/24 and 12/6/23 et al

Plan of Correction

Directed [REDACTED] - 04/03/2024)

DIRECTED: Within 24 hours of receipt of the plan of correction - The administrator will install new batteries in all carbon monoxide detectors and test them weekly. The administrator will ensure that the batteries are labeled with the date of installation and replaced at least once annually or such time as the unit signals a drained or failing battery, whichever is sooner. Documentation will be kept. [REDACTED] 4/3/24

DIRECTED: Within 2 days of receipt of the plan of correction - All staff will be educated on how to change the batteries in the carbon monoxide detectors, testing of the detectors and emergency procedures if the alarm sounds. Documentation will be kept. [REDACTED] 4/3/24

121a - Unobstructed Egress

2. Requirements

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

On 3/18/24, at approximately 9:03 a.m., the emergency exit door located in Hallway A was extremely difficult to open.

Repeat Violation: 2/29/24 and 12/6/23 et al

Plan of Correction

Directed [REDACTED] - 04/03/2024)

DIRECTED: Within 24 hours of receipt of the plan of correction - The administrator will ensure the exit door is repaired so it opens easily. The administrator will utilize a repair person, if needed, to complete this task. Documentation will be kept. [REDACTED] 4/3/24

121a - Unobstructed Egress (continued)

DIRECTED: Within 24 hours of receipt of the plan of correction - All staff will be reeducated on this requirement. Documentation will be kept. ■ 4/3/24

DIRECTED: Within 30 days of receipt of the plan of correction and at least monthly thereafter - The administrator will test all exit doors to ensure they open easily. Documentation will be kept. ■ 4/3/24