

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

June 26, 2024

[REDACTED], ADMINISTRATOR
UMH PA CORP
[REDACTED]

RE: WESLEY VILLAGE
215 ROBERTS ROAD
PITTSTON, PA, 18640
LICENSE/COC#: 24188

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/14/2024 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: *WESLEY VILLAGE* License #: *24188* License Expiration: *08/15/2024*

Address: *215 ROBERTS ROAD, PITTSTON, PA 18640*

County: *LUZERNE* Region: *NORTHEAST*

Administrator

Name: [REDACTED] Phone: [REDACTED]

Legal Entity

Name: *UMH PA CORP*

Address: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *76* Waking Staff: *57*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:

Reason: *Incident* Exit Conference Date: *05/14/2024*

Inspection Dates and Department Representative

05/14/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *157* Residents Served: *73*

Secured Dementia Care Unit

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

Hospice

Current Residents: *1*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *73*

Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*

Have Mobility Need: *3* Have Physical Disability: *0*

Inspections / Reviews

05/14/2024 Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/15/2024*

06/14/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: *06/25/2024*

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *07/01/2024*

Inspections / Reviews *(continued)*

06/26/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/25/2024

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

141b1 - Annual Medical Evaluation

1. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident # 1 failed to have an annual health evaluation completed in 2023. The last completed DME was done on

[REDACTED]

Plan of Correction

Accept [REDACTED] - 06/14/2024)

1. 141b1 - Annual Medical Evaluation:

The Administrator or their designee will conduct an audit on all residents to monitor compliance with this regulatory requirement, ensuring all DMEs are correct and up to date for accuracy. The completion date is set for July 1st. Once the audit is complete, the Administrator or their designee will review initial DMEs for completeness monthly and as needed thereafter. The administrator and all licensed staff responsible for ensuring medical evaluations are completed in compliance have been re-educated regarding the requirements of regulation 141b1.

Licensee's Proposed Overall Completion Date: 07/01/2024

Implemented [REDACTED] - 06/26/2024)