



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Emailing Date: March 17, 2025

[REDACTED]
Ruth M. Smith Center
[REDACTED]

RE: Ruth M. Smith Center
407 S. Main Street
Building A
Sheffield, PA 16347
License #: 44595

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department), licensing inspection on November 8, 2024 and the corrections you have made after our inspection, we have found the above facility to be in compliance with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes). Therefore, a regular license is being issued. Your license is enclosed.

Sincerely,

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

Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosures
License
Licensing Inspection Summary

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

Facility Information

Name: *RUTH M. SMITH CENTER* License #: *44595* License Expiration: *02/02/2025*
Address: *407 SOUTH MAIN STREET, BUILDING A, SHEFFIELD, PA 16347*
County: *WARREN* Region: *WESTERN*

Administrator

Name: [REDACTED]

Legal Entity

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

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *11/25/1983* Issued By: *Dept 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, Provisional* Exit Conference Date: *11/08/2024*

Inspection Dates and Department Representative

11/08/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *10* 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: *8* Are 60 Years of Age or Older: *7*
Diagnosed with Mental Illness: *10* Diagnosed with Intellectual Disability: *6*
Have Mobility Need: *0* Have Physical Disability: *1*

Inspections / Reviews

11/08/2024 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *11/30/2024*

Inspections / Reviews *(continued)*

12/02/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/29/2024

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 12/31/2024

03/10/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/29/2024

Reviewer: [REDACTED]

Follow-Up Type: *Exception*

20b1 - Financial Records

1. Requirements

2600.

20.b. If the home provides assistance with financial management or holds resident funds, the following requirements apply:

- 1. The home shall keep a record of financial transactions with the resident, including the dates, amounts of deposits, amounts of withdrawals and the current balance.

Description of Violation

The home provided financial management for resident #1 and resident #2; however, the home does not have a record of financial transactions that include the amounts out withdraws and the current balance.

Plan of Correction

Accept [redacted] - 12/02/2024)

The Fiscal Manager created a record of financial transactions on 11/08/24 to clarify every transaction, The document includes dates, amounts of deposits, amounts of withdrawals, cashing checks, signature line for resident and staff, and the current balance. This form was immediately put into use by the Fiscal Manager on 11/08/24 and will be used with every transaction thereafter.

The Fiscal Manager, Fiscal Assistant and Administrator were trained on Regulation 2600.20.b.1 and the requirements of financial management by the Executive Director on 11/13/24.

The Fiscal Manager or the Fiscal Assistant will verify that all transactions are being recorded and the balance is accurate beginning 11/08/24 and verify accuracy again on 12/02/24 and monthly thereafter. Documentation of the checks will be kept.

The Administrator will check that the Fiscal Manager and Fiscal Assistant are checking that the transactions are being recorded and the balances for accuracy monthly beginning 12/02/24 and monthly thereafter. Documentation of these checks will be kept on the Administrator Task Sheet.

Licensee's Proposed Overall Completion Date: 11/25/2024

Implemented [redacted] - 03/10/2025)

20b3 - Written Receipts

2. Requirements

2600.

20.b. If the home provides assistance with financial management or holds resident funds, the following requirements apply:

- 3. The home shall obtain a written receipt from the resident for cash disbursements at the time of disbursement.

Description of Violation

The home provided financial management for residents in the home and held resident money. The home did not have a resident signature, for multiple residents, on multiple date, to include:

Resident #1's \$50.00 cashed check on 9/12/24

Resident #2's \$10.00 cashed check on 11/4/24, 10/8/24, 10/4/24, 9/30/24, a \$40.00 cashed check on 9/16/24, and a \$10.00 cash withdraw on 10/1/24

20b3 - Written Receipts (continued)

Plan of Correction

Accepted [redacted] - 12/02/2024)

The Fiscal Manager created a record of financial transactions on 11/08/24. The form requires the resident and staff to sign for every transaction. This form was immediately put into use on 11/08/24 by the Fiscal Manager.

The Fiscal Manager, Fiscal Assistant, and Administrator were trained on Regulation 2600.20.b.3 and the requirements of financial management by the Executive Director on 11/13/24.

The Fiscal Manager or the Fiscal Assistant will check that the signatures of the resident and staff are present for every transaction beginning 11/08/24 and monthly thereafter. Documentation of these checks will be kept.

The Administrator will verify that the resident and staff signatures are present beginning 12/02/24 and monthly thereafter. Documentation of these checks will be kept.

Licensee's Proposed Overall Completion Date: 11/25/2024

Implemented [redacted] - 03/10/2025)

20b8 - Quarterly Account

3. Requirements

2600.

20.b. If the home provides assistance with financial management or holds resident funds, the following requirements apply:

- 8. The home shall give the resident and the resident's designated person, an itemized account of financial transactions made on the resident's behalf on a quarterly basis.

Description of Violation

The home provided financial management for residents residing in the home. The home managed finances for resident #1 and resident #2; however, the home did not provide quarterly financial statements to the resident from 1/1/24 to 11/1/24.

Plan of Correction

Accepted [redacted] 12/02/2024)

The Fiscal Manager will send an itemized account of financial transactions made on the resident's behalf to the resident and the resident's designated person beginning on 12/31/24, 03/31/24, 06/30/24, 09/30/24 and quarterly thereafter.

The Fiscal Manager will keep documentation of the quarterly statements beginning 12/31/24 and quarterly thereafter.

The Fiscal Manager, Fiscal Assistant, and Administrator were trained on Regulation 2600.20.b.8 and the requirements of financial management by the Executive Director on 11/13/24.

The Administrator will verify quarterly that the statements are being sent in a timely manner to ensure compliance beginning 12/31/24. Documentation of these checks will be kept.

Licensee's Proposed Overall Completion Date: 11/25/2024

Implemented [redacted] - 03/10/2025)

20b9 - Record Keeping

4. Requirements

2600.

20.b. If the home provides assistance with financial management or holds resident funds, the following requirements apply:

9. A copy of the itemized account shall be kept in the resident's record.

Description of Violation

The home provided financial management for resident #1; however, the home did not have an itemized account of transaction for a \$50.00 cashed check on 9/12/24.

The home provided financial management for resident #2; however, the home did not have an itemized account of transaction for multiple transactions, to include the following: a \$10.00 cashed check on 11/4/24, 10/8/24, 10/4/24, 9/30/24 and a \$10,00 cash withdraw on 10/1/24.

Plan of Correction

Accept ([REDACTED] - 12/02/2024)

The Fiscal Manager will keep a hard copy of the resident's itemized transactions in a resident's file accessible to the Administrator, Fiscal Assistant, Executive Director and will be available for a resident and the resident's designated person at request during business hours beginning 11/08/24 and every day thereafter.

The Fiscal Manager will ensure that all transactions made on behalf of the resident are recorded beginning 11/08/24 and monthly thereafter. Documentation of these monthly checks will be kept.

The Administrator will verify a copy of the resident's itemized transaction are accessible to the Administrator, Fiscal Manager, Fiscal Assistant, and Executive Director and available at request for a resident and resident's designated person during business hours beginning weekly on 12/02/24 for one month and monthly thereafter to ensure compliance. Documentation of these checks will be kept.

The Fiscal Manager, Fiscal Assistant, and Administrator were trained on Regulation 2600.20.b.8 and the requirements of financial management by the Executive Director on 11/13/24.

Licensee's Proposed Overall Completion Date: 11/25/2024

Implemented ([REDACTED] - 03/10/2025)

65f - Training Topics

5. Requirements

2600.

65.f. Training topics for the annual training for direct care staff persons shall include the following:

Description of Violation

Direct Care staff person A, hired [REDACTED]/2019, did not receive annual training in training year 2023 in the following areas:

Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan

65f - Training Topics (continued)

Personal care service needs of the resident

Plan of Correction

Accept [redacted] - 12/02/2024)

Direct Care staff person A will complete training on or before 12/05/24 in the following areas: Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation, support plan and personal care service needs of the resident.

The Administrator will train the Fiscal Assistant to assist in filing, recording, and tracking the staff training beginning 11/27/30.

The Administrator went through the training files on 11/11/24 to check that all staff is up to date with the 2024 training schedule. Letters will be sent to all staff that are not up to date on training on or before 12/10/24. Documentation of these letters will be kept.

The Administrator will remind staff one month in advance of up coming trainings beginning 11/27/24 and monthly thereafter.

On 11/25/24, The Fiscal Assistant added to the December Task Sheets: personal care aides task sheet on every shift:

check that your training is up to date

Supervisor Task Sheet:

check that training is up to date.

These checks will be on the task sheet beginning 12/01/24 and monthly thereafter.

The Administrator will check for compliance beginning 12/27/24 and monthly thereafter. Documentation of the checks will be kept on the Administrator Task Sheet.

The Administrator was trained on Regulation 2600.65.f. on 11/13/24 by the Executive Director.

All Staff will be trained on Regulation 2600.65.f. on 11/27/24 by the Administrator.

Licensee's Proposed Overall Completion Date: 11/25/2024

Implemented [redacted] - 03/10/2025)

187a - Medication Record

6. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

Description of Violation

Resident #2 is ordered Acetaminophen 325mg, 650mg(2x325mg) orally 3 times a day as needed; however, the medication administration record indicates 2 tablets by mouth every 6 hours as needed.

187a - Medication Record (continued)

Plan of Correction**Accept** [REDACTED] - 12/02/2024)

On 11/08/24, during inspection the Supervisor called Resident's #2 HCP and had the order for Acetaminophen 325 mg faxed to the facility and immediately corrected the MAR with the correct information.

All Supervisors will be trained by the Medication Trainer on 11/27/24. This training will include recording and storage of medications and pharmacy labels must match the Medication Administration Record.

The Administrator will verify the MAR weekly beginning 11/11/24 for one month and monthly thereafter to ensure compliance. Documentation of these checks will be kept.

All staff will be trained by the Administrator on 11/27/24 on Regulation 2600.87.a.

Licensee's Proposed Overall Completion Date: 11/25/2024

Implemented [REDACTED] - 03/10/2025)