

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

May 12, 2025

[REDACTED]
QUALITY LIFE SERVICES-MERCER, LLC
[REDACTED]
[REDACTED]

RE: QUALITY LIFE SERVICES-MERCER
8221 LAMOR ROAD
MERCER, PA, 16137
LICENSE/COC#: 45533

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/04/2025 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: *QUALITY LIFE SERVICES-MERCER* License #: *45533* License Expiration: *09/01/2025*
 Address: *8221 LAMOR ROAD, MERCER, PA 16137*
 County: *MERCER* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *QUALITY LIFE SERVICES-MERCER, LLC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-1* Date: *02/04/1997* Issued By: *Dept. of Health*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *36* Waking Staff: *27*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint, Incident* Exit Conference Date: *03/04/2025*

Inspection Dates and Department Representative

03/04/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *36* Residents Served: *18*

Secured Dementia Care Unit
 In Home: *Yes* Area: *1ST FLOOR REAR* Capacity: *36* Residents Served: *18*

Hospice
 Current Residents: *0*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *18*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *18* Have Physical Disability: *0*

Inspections / Reviews

03/04/2025 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/28/2025*

04/09/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *04/24/2025*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *04/16/2025*

Inspections / Reviews (*continued*)

04/22/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/24/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 04/25/2025

05/12/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/24/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

15a Resident Abuse Report

1. Requirements

2600.

15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § 10225.701 10225.707) and 6 Pa. Code § 15.21 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

On [redacted] at approximately 6:15a.m., staff person A and staff person B went into resident [redacted] bedroom to assist [redacted] with incontinence care. While staff person A was assisting resident [redacted] staff person B said to staff person A if [redacted] were my child, I would [redacted] [redacted] for this. Staff person A reported this incident to staff person C and D at approximately 10:30a.m. However, this incident was not reported to the local Area Agency on Aging.

Plan of Correction

Accept ([redacted] 04/22/2025)

The PCHA will be responsible for this plan of correction. On 03/20/2025, the PCHA completed an Act 13 suspected abuse report in accordance with the Older Adult Protective Service Act. The Act 13 suspected abuse report was faxed to the Older Adult Protective Services in Mercer County on 03/20/25 by the PCHA. The PCHA contacted the Older Adult Protective Services in Mercer County via telephone on 3/20/25 to report the alleged incident of abuse from 02/26/25.

The Nursing Home Administrator will complete education with staff member C and staff member D by 04/16/25 on the importance of notifying immediately the Older Adult Protective Services of Mercer County verbally by telephone and in writing (Act 13 Form) anytime there is an alleged abuse allegation. This education will be documented by the PCHA on a State approved record of training form and kept on file by 4/26/25.

The PCHA will complete education with the staff team by 3/31/25 on the importance of notifying immediately the Older Adult Protective Services of Mercer County verbally and in writing anytime there is an alleged abuse allegation. This education will be documented by the PCHA on a State approved record of training form and kept on file by 3/31/25.

Licensee's Proposed Overall Completion Date: 04/16/2025

Implemented ([redacted] 05/12/2025)

16c Written Incident Report

2. Requirements

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On [redacted] at approximately 6:15a.m., staff person A and staff person B went into resident [redacted] bedroom to assist [redacted] with incontinence care. While staff person A was assisting resident [redacted] staff person B said to staff person A if [redacted] were my child, I would [redacted] [redacted] for this. Staff person A reported this incident to staff person C and D at approximately 10:30a.m. However, this incident was not reported to the Department.

16c Written Incident Report (continued)

Plan of Correction

Accept (█ - 04/09/2025)

The PCHA will be responsible for this plan of correction. Staff member C and D will be educated by the Nursing Home Administrator by 3/31/25 on regulation 2600.16.c relating to abuse reporting in accordance with the home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. This education will be documented by the Nursing Home Administrator on a State approved record of training form and kept on file by 3/31/25.

The PCHA will complete education with the staff team by 3/31/25 on the importance on abuse reporting in accordance with the home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. This education will be documented by the PCHA on a State approved record of training form and kept on file by 3/31/25.

Licensee's Proposed Overall Completion Date: 03/31/2025

Implemented (█ 05/12/2025)

42c - Treatment of Residents

3. Requirements

2600.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

On █ at approximately 6:15a.m., staff person A went into resident █ room with staff person B. Staff person B requested █ assist █ with resident █ because the resident had urinated and defecated on █ floor and pulled █ soiled brief down to █ ankles. While staff person A was providing personal hygiene assistance to resident █, staff person B said to staff person A, 'If █ were my child, I would █ for this.'

Plan of Correction

Accept (█ - 04/22/2025)

The PCHA will be responsible for this plan of correction. On 2/26/25, when the PCHA received the alleged abuse complaint from DHS via telephone, the PCHA placed staff member B on suspension pending the outcome of the investigation. The PCHA completed the investigation on 3/3/25. The PCHA terminated staff member B employment on 3/3/25 due to the facts of the investigation proving that staff member B did make the inappropriate comment towards staff member A while Resident #1 was present.

Staff member A will receive education from the PCHA by 3/31/25 on the obligation to report abuse allegations immediately to the Department and to staff member A supervisor immediately. This education will be documented by the PCHA on a State approved record of training form and kept on file by 3/31/25.

The home's staff team will receive education by 3/31/25 from the PCHA regarding their designation as mandated reporters and their obligation to report allegations of abuse immediately to the Department and to facility administration. The home's staff team will also receive education by 3/31/25 from the PCHA on abuse prevention and reporting policy and expectation that staff treat residents with respect and preserve residents' dignity. This education will be documented by the PCHA on a State approved record of training form and kept on file by 3/31/25.

42c Treatment of Residents (continued)

The PCHA will complete education with the staff team by 4/16/25 on the importance of notifying immediately the Older Adult Protective Services of Mercer County verbally and in writing anytime there is an alleged abuse allegation. This education will be documented by the PCHA on a State approved record of training form and kept on file by 4/16/25.

The PCHA will post the home's Abuse Prevention and Reporting policy on the employee bulletin board for staff reference by 3/31/25. The PCHA will complete random interviews of two facility staff weekly for one month (3/31/25 5/1/25) to assure that staff understand abuse reporting policy, requirements and regulations. The PCHA will document the random interviews of staff on an audit tool that the PCHA will create by 3/31/25.

Licensee's Proposed Overall Completion Date: 04/16/2025

Implemented [REDACTED] - 05/12/2025)