



Pennsylvania
Department of Human Services

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: MAY 29, 2026

[REDACTED]
Sterling Home LLC
[REDACTED]

RE: Sterling Home
1318 Arch Street
McKeesport, Pennsylvania
License #: 452694

Dear [REDACTED]:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department), licensing inspection on April 21, 2026, of the above facility that is operating pending an appeal, 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 these violations may result in further licensing enforcement action.

Sincerely,

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

Facility Information

Name: *STERLING HOME* License #: *45269* License Expiration: *12/04/2025*
Address: *1318 ARCH STREET, MCKEESPORT, PA 15132*
County: *ALLEGHENY* Region: *WESTERN*

Administrator

Name: [REDACTED]

Legal Entity

Name: *STERLING HOME LLC*
Address: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *01/30/2023* Issued By: *L&I*
Type: *C-2 LP* Date: *08/22/2001* Issued By: *L&I*

Staffing Hours

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

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint, Monitoring* Exit Conference Date: *04/21/2026*

Inspection Dates and Department Representative

04/21/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *42* Residents Served: *34*

Secured Dementia Care Unit

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

Hospice

Current Residents: *2*

Number of Residents Who:

Receive Supplemental Security Income: *21* Are 60 Years of Age or Older: *31*
Diagnosed with Mental Illness: *26* Diagnosed with Intellectual Disability: *1*
Have Mobility Need: *2* Have Physical Disability: *1*

Inspections / Reviews

04/21/2026 - Partial

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

5a1 - DHS Access

1. Requirements

2600.

5.a. The administrator or a designee shall provide, upon request, immediate access to the home, the residents and records to:

1. Agents of the Department.

Description of Violation

At 9:47 a.m., the Department requested access from direct care staff person A, [REDACTED], to all of the training files for each of the home's medication passers to include direct care staff persons B, C, D, and E. Additionally, requests were made for direct care staff person F's train-the-trainer certificate. Direct care staff person A advised the Department that training records for direct care staff persons B and E were located off site with direct care staff person F. Incomplete training documentation was provided for direct care staff person C and outdated training documentation was provided for direct care staff person D. The remaining documentation was requested again during the exit conference at approximately 5:00 p.m. Direct care staff person A was sent subsequent reminders through electronic messaging on 4/21/26 at 6:15 p.m., as well as 4/23/26 at 9:06 a.m. and again at 9:42 a.m. However, the requested documentation for direct care staff persons B, E, and F have not been provided to the Department.

Plan of Correction

Directed [REDACTED] - 04/28/2026

Within two days of receipt of the plan of correction: The administrator shall provide all the records cited in the violation to the department via e-mail to [REDACTED] [REDACTED] 4/28/26

Within two days of receipt of the plan of correction: The administrator shall develop and implement a policy and procedures for providing the department immediate access to the home, the residents and records [REDACTED] /28/26

Within two days of receipt of the plan of correction: The administrator shall educate all staff persons on the regulation and the homes policy and procedures regarding record access. Documentation of education shall be kept. [REDACTED] 4/28/26

Directed Completion Date: 04/30/2026

60a - Staff/Support Plan

2. Requirements

2600.

60.a. Staffing shall be provided to meet the needs of the residents as specified in the resident's assessment and support plan.

Description of Violation

Multiple residents are prescribed pro re nata (PRN) medications, including residents #1, #2, #3, and #4. There were no qualified staff trained to pass medications present in the personal care home on numerous dates and times ranging from 4/1/26 through 4/21/26 to include but not limited to:

- 4/12/26 from 12:00 a.m. through 11:59 p.m.
- 4/13/26 from 12:00 a.m. through 8:00 a.m.
- 4/13/26 from 4:00 p.m. through 11:59 p.m.
- 4/14/26 from 12:00 a.m. through 7:00 a.m.
- 4/14/26 from 4:00 p.m. through 11:59 p.m.
- 4/15/26 from 12:00 a.m. through 7:00 a.m.

60a - Staff/Support Plan (continued)

- 4/16/26 from 12:00 a.m. through 7:00 a.m.
- 4/16/26 from 4:00 p.m. through 11:59 p.m.
- 4/17/26 from 12:00 a.m. through 7:00 a.m.
- 4/17/26 from 4:00 p.m. through 11:59 p.m.
- 4/18/26 from 12:00 a.m. through 11:59 p.m.
- 4/19/26 from 12:00 a.m. through 11:59 p.m.
- 4/20/26 from 12:00 a.m. through 7:00 a.m.
- 4/20/26 from 4:00 p.m. through 11:59 p.m.
- 4/21/26 from 12:00 a.m. through 7:00 a.m.

Resident #2's medical evaluation, dated [REDACTED]/26, indicated the resident is unable to self-administer medication. The resident's support plan, dated 4/6/26, indicated "Resident #2 cannot administer [REDACTED] own medications" and "Trained Med tech's will give medication to the resident at the prescribed times by the PCP." Resident #2 is prescribed Ipratropium Albuterol 0.5-3mg/mL, inhale one vial via nebulizer every four hours. On 4/19/26 at 12:00 a.m. and 4:00 a.m., resident #2 self-administered the Ipratropium Albuterol 0.5-3mg/mL nebulizer treatments.

Plan of Correction**Directed [REDACTED] 04/28/2026)**

Within one day of receipt of the plan of correction: The administrator shall schedule and ensure there is at least one staff person in the home qualified to administer medications if there are residents in the home who are prescribed PRN medications. [REDACTED] 4/28/26

Within five days of receipt of the plan of correction: The administrator or designee who schedules staff will ensure there is at least one staff person in the home qualified to administer medications if there are residents in the home who are prescribed PRN medications. The administrator or designee will audit the schedule and staff working hours weekly to ensure there is at least one staff person in the home qualified to administer medications if there are residents in the home who are prescribed PRN medications. [REDACTED] 4/28/26

Directed Completion Date: 05/03/2026

85e - Trash Outside Home**3. 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

At approximately 9:03 a.m., there were several items of trash that were found outside of a garbage bag and outside of the dumpster on the grounds of the personal care home to include:

- *A black square Comfort Essentials seat pad cushion in the grass to the right of the back door exit*
- *Assorted medicine cups, jelly and butter packets*
- *Surgical gloves and clear plastic bags*
- *An empty gallon milk jug and empty gallon plastic container*

85e - Trash Outside Home (continued)

- Napkins and empty toilet paper rolls
- One pair of headphones

REPEAT VIOLATION 3/24/26 et. al.

Plan of Correction

Directed [REDACTED] - 04/28/2026)

Within one day of receipt of the plan of correction: The administrator shall have all trash on the ground removed and the dumpster lids closed. [REDACTED] 4/28/26

Within three days of receipt of the plan of correction: The administrator shall re-educate all staff on the requirement to keep trash in covered receptacles and to notify the administrator when the dumpster is full. Documentation shall be kept in accordance with Regulation 2600.65i. [REDACTED] 4/28/26

Within one day of receipt of the plan of correction: A designated staff person shall audit the dumpster daily to ensure the dumpster is covered and trash is in covered receptacles. Documentation of audits shall be kept [REDACTED] 4/28/26

Within one day of receipt of the plan of correction: The administrator shall schedule for earlier or additional trash removal if needed. [REDACTED] 4/28/26

Directed Completion Date: 05/01/2026

182b - Prescription Medication**4. Requirements**

2600.

182.b. Prescription medication that is not self-administered by a resident shall be administered by one of the following:

4. A staff person who has completed the medication administration training as specified in § 2600.190 (relating to medication administration training) for the administration of oral; topical; eye, nose and ear drop prescription medications; insulin injections and epinephrine injections for insect bites or other allergies.

Description of Violation

On 4/20/26, direct care staff person E administered Ipratropium Albuterol 0.5-3mg/mL via nebulizer at 12:00 a.m. and 4:00 a.m. to resident #2 in addition to MAPAP 325mg tablets, a 650mg dose to resident #3 at 12:00 a.m. However, direct care staff person E has not successfully completed the medication administration training as specified in § 2600.190 for the administration of oral; topical; eye, nose and ear drop prescription medications; insulin injections and epinephrine injections for insect bites or other allergies.

Plan of Correction

Directed [REDACTED] - 04/28/2026)

Directed Completion Date: 05/01/2026

183b - Meds and Syringes Locked

5. Requirements

2600.

183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

Description of Violation

At approximately 1:30 p.m., numerous medications that belonged to resident #2 were found unlocked and accessible to all residents of the personal care home in resident room #19 belonging to resident #2 and resident #5 to include:

- *Ipratropium Albuterol 0.5-3mg/mL nebulizer vials*
- *Trelegy Ellipta 100-62.5-25 Inhaler*
- *Albuterol Sulfate HFA 90mcg inhaler*
- *Fluticasone Propionate 50mcg nasal spray*

REPEAT VIOLATION 3/24/26 et. al.

Plan of Correction

Directed [REDACTED] - 04/28/2026)

Within one day of receipt of the plan of correction: The administrator shall secure all of resident #2's medications as indicated in the Licensing Inspection Summary. [REDACTED] 4/28/26

Within one day of receipt of the plan of correction: The administrator shall conduct an initial audit of the entire home to ensure prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. The audits shall continue monthly following the initial audit. Documentation of the audits shall be kept. [REDACTED] 4/28/26

Within three days of receipt of the plan of correction: The administrator shall educate all staff persons regarding the regulation and the home's policy and procedures to ensure compliance. Documentation of education will be kept in accordance with Regulation 2600.65i. [REDACTED] 4/28/26

Directed Completion Date: 05/01/2026

187b - Date/Time of Medication Admin.

6. Requirements

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

Resident #3 is prescribed MAPAP 325mg (Acetaminophen), take two tablets (650mg) by mouth every six hours. However, on 4/7/26 and 4/19/26 at approximately 12:00 a.m., the medication was administered to resident #3 but was not documented at the time of administration and the resident's April 2026 medication administration record was left blank.

Resident #4 is prescribed APAP 325mg tablet, take by mouth two tablets three times daily. However, on 4/11/26 at approximately 2:00 p.m., the medication was administered to resident #4, but was not documented at the time of administration and the resident's April 2026 medication administration record was left blank.

REPEAT VIOLATION 3/24/26 et. al., 11/17/25, 8/20/25 et. al.

187b - Date/Time of Medication Admin. (continued)

Plan of Correction**Directed** [REDACTED] - 04/28/2026

Within two days of receipt of the plan of correction: The administrator or a qualified medication administration train the trainer shall educate all staff qualified to administer medications on the regulation and the procedures for medication administration including documentation. Documentation shall be kept in accordance with Regulation 2600.190c. [REDACTED] 4/28/26

Within two days of receipt of the plan of correction: The administrator or designated staff person qualified to administer medications shall audit the medication administration records and medication orders weekly to ensure accuracy. Documentation of audits shall be kept. [REDACTED] 4/28/26

Directed Completion Date: 04/30/2026

187d - Follow Prescriber's Orders

7. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #3 is prescribed MAPAP 325mg (Acetaminophen), take two tablets (650mg) by mouth every six hours. However, on 4/17/26 at approximately 12:00 a.m. resident #3 was not administered the two tablets of MAPAP 325mg, both tablets remained in the blister package.

Resident #4 is prescribed APAP 325mg tablet, take by mouth two tablets three times daily. However, on 4/10/26 at approximately 2:00 p.m. the two APAP 325mg tablets were not administered to resident #4, both tablets remained in the blister package.

REPEAT VIOLATION 3/24/26 et. al., 11/17/25

Plan of Correction**Directed** [REDACTED] - 04/28/2026

Within two days of receipt of the plan of correction: The administrator or a qualified medication administration train the trainer shall educate all staff persons qualified to administer medications on the regulation and the procedures for medication administration. Documentation shall be kept in accordance with Regulation 2600.65i. [REDACTED] 4/28/26

Within two days of receipt of the plan of correction: The administrator or a qualified medication administration train the trainer shall observe each staff person administering medications at least once a week for four weeks to ensure the home's procedures and the regulations are followed. Documentation of observations shall be kept. [REDACTED] 4/28/26

Within one day of receipt of the plan of correction: The administrator shall file an incident report for each medication error via e-mail to [REDACTED] /28/26

Within one day of receipt of the plan of correction: The administrator shall notify the residents and the resident's designated persons of the medication errors for each resident. Documentation of notifications shall be kept. [REDACTED] 4/28/26

Within one day of receipt of the plan of correction: The administrator shall notify the prescriber of the medication errors for each resident. Documentation of notifications shall be kept. [REDACTED] 4/28/26

187d - Follow Prescriber's Orders (continued)

part of the resident's permanent record. ■ 4/28/26

Directed Completion Date: 04/30/2026

190a - Completion Medication Course**8. Requirements**

2600.

190.a. A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

Description of Violation

Direct care staff person B has not successfully completed the approved medication administration course annual practicum in the past year and was not qualified to administer oral; topical; eye, nose and ear drop prescription medications. However, direct care staff person B administered medications to numerous residents of the personal care home during the 3:00 p.m. to 11:00 p.m. shift on dates ranging from 4/1/26 through 4/21/26 to include but not limited to:

- 4/14/26
- 4/16/26
- 4/17/26
- 4/18/26

Direct care staff person C has not successfully completed the approved medication administration course annual practicum in the past year and was not qualified to administer oral; topical; eye, nose and ear drop prescription medications. However, direct care staff person C administered medications to numerous residents of the personal care home at various times of day on dates ranging from 4/1/26 through 4/21/26 to include but not limited to:

- 4/12/26 from 7:00 a.m. to 3:00 p.m.
- 4/13/26 from 3:00 p.m. to 9:00 p.m.
- 4/15/26 from 3:00 p.m. to 11:00 p.m.
- 4/18/26 from 7:00 a.m. to 3:00 p.m.
- 4/19/26 from 7:00 a.m. to 9:00 p.m.

Direct care staff person D has not successfully completed the approved medication administration course annual practicum in the past year and was not qualified to administer oral; topical; eye, nose and ear drop prescription medications. However, direct care staff person D administered medications to numerous residents of the personal care home at various times of day on dates ranging from 4/1/26 through 4/21/26 to include but not limited to:

- 4/13/26 from 7:00 a.m. to 3:00 p.m.
- 4/14/26 from 8:00 a.m. to 4:30 p.m.
- 4/16/26 from 8:00 a.m. to 3:00 p.m.

190a - Completion Medication Course (*continued*)**Plan of Correction****Directed** [REDACTED] - 04/28/2026)

Within one day of receipt of the plan of correction: The administrator shall not permit direct care staff persons B, C, D, or any other staff person to administer medications unless they have successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years. Documentation shall be kept in accordance with Regulation 2600.190c. [REDACTED] 4/28/26

Within one day of receipt of the plan of correction: The administrator shall conduct an initial audit of all current staff records to ensure all staff administering medications meet the requirements to administer medications. The audits shall continue monthly following the initial audit. Documentation of the audits shall be kept. [REDACTED] 4/28/26

Within two days of receipt of the plan of correction: The administrator or a qualified medication administration train the trainer shall educate all staff persons qualified to administer medications on the home's policy and procedures and the regulation. Documentation shall be kept in accordance with Regulation 2600.190c. [REDACTED] 4/28/26

Directed Completion Date: 04/30/2026

190b - Insulin Injections

9. Requirements

2600.

190.b. A staff person is permitted to administer insulin injections following successful completion of a Department-approved medications administration course that includes the passing of a written performance-based competency test within the past 2 years, as well as successful completion of a Department-approved diabetes patient education program within the past 12 months.

Description of Violation

Direct care staff person B has not received diabetic education in the past 12 months. However, direct care staff person B has administered 10 units of Lantus insulin to resident #4 on numerous occasions during the month of April 2026 at 8:00 p.m. to include:

- 4/2/26
- 4/4/26
- 4/5/26
- 4/7/26
- 4/10/26
- 4/11/26
- 4/14/26
- 4/16/26
- 4/17/26
- 4/18/26

Plan of Correction**Directed** [REDACTED] - 04/28/2026)

Within one day of receipt of the plan of correction: The administrator shall not permit direct care staff persons B or any other staff person to administer insulin injections unless they have successfully completed of a

190b - Insulin Injections (continued)

Department-approved medications administration course that includes the passing of a written performance-based competency test within the past 2 years, as well as successful completion of a Department-approved diabetes patient education program within the past 12 months. Documentation shall be kept in accordance with Regulation 2600.190c. █ 4/28/26

Within one day of receipt of the plan of correction: The administrator shall conduct an initial audit of all current staff records to ensure all staff administering insulin injections meet the requirements to administer insulin injections and continue to meet the requirements to administer insulin injections. The audits shall continue monthly following the initial audit. Documentation of the audits shall be kept. █ 4/28/26

Directed Completion Date: 04/30/2026

252 - Record Content**10. Requirements**

2600.

252. Content of Resident Records - Each resident's record must include the following information:

23. If the resident dies in the home, a copy of the official death certificate.

Description of Violation

On resident #6's date of death at approximately 1:20 p.m., the resident ceased to breathe. However, a copy of the resident's death certificate had not been obtained by the home and was not a part of the resident's record.

Plan of Correction

Directed █ - 04/28/2026)

Within two days of receipt of the plan of correction: The administrator shall obtain resident #6's death certificate and maintain the death certificate in the resident's record. █ 4/28/26

Within two days of receipt of the plan of correction: The administrator shall audit all records for residents who have passed away to ensure the death certificate is in the resident's record. █ 4/28/26

Directed Completion Date: 04/30/2026