

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

September 23, 2026

[REDACTED]
EBONY'S ENTERPRISES
[REDACTED]

RE: EBONY'S PERSONAL CARE
2521 VERSALLIES AVE
MCKEESPORT, PA, 15132
LICENSE/COC#: 45634

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/25/2026 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: EBONY'S PERSONAL CARE

License #: 45634

License Expiration: 12/10/2026

Address: 2521 VERSALLIES AVE, MCKEESPORT, PA 15132

County: ALLEGHENY

Region: WESTERN

Administrator

Name:

Phone:

Email:

Legal Entity

Name: EBONY'S ENTERPRISES

Address:

Phone:

Email:

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff:

Total Daily Staff: 17

Waking Staff: 13

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Fine

Exit Conference Date: 07/13/2026

Inspection Dates and Department Representative

06/25/2026 - On-Site:

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 18

Residents Served: 17

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 9

Are 60 Years of Age or Older: 16

Diagnosed with Mental Illness: 8

Diagnosed with Intellectual Disability: 1

Have Mobility Need: 0

Have Physical Disability: 1

Inspections / Reviews

06/25/2026 Partial

Lead Inspector:

Follow-Up Type: POC Submission

Follow-Up Date: 07/23/2026

07/30/2026 - POC Submission

Submitted By:

Date Submitted: 08/24/2026

Reviewer:

Follow-Up Type: POC Submission

Follow-Up Date: 08/04/2026

Inspections / Reviews (*continued*)

08/14/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 08/24/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 08/21/2026

09/23/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/24/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

58a - Awake Staff 16 or More

1. Requirements

2600.

58.a. If a home serves 16 or more residents, all direct care staff persons on duty in the home shall be awake at all times one or more residents are present in the home.

Description of Violation

The home has served at least 16 residents for the past several months and the routine staffing schedule has staff person A, the administrator, working exclusively from Sunday at 7 a.m. until Monday at 7 p.m. During this 36-hour shift, staff person A sleeps a few hours on the bottom floor of the home without any other direct care staff present.

Plan of Correction

Do Not Accept [REDACTED] - 07/30/2026)

See attached. Effective immediately, Ebony's Blessings Personal Care has revised its staffing schedule to ensure compliance with 55 Pa. Code 2600.58(a). The administrator will no longer work a continuous 36-hour shift without additional direct care staff present. A second direct care staff person is now scheduled to provide overnight coverage, ensuring that all direct care staff on duty remain awake while residents are present in the home. The staffing schedule will be reviewed weekly and monitored regularly to ensure adequate awake staffing coverage is maintained at all times and to prevent future occurrences.

Licensee's Proposed Overall Completion Date: 07/23/2026

Update: 07/30/2026

Thank you very much for your submission. Nice job! Overall, this is a workable 1st submission, so I appreciate that. There are just a few measurable details needed to make the plan acceptable. If you have any questions, comments, or concerns, please feel free to call me at [REDACTED]

Please add the responsible person and the date the schedules were revised. Include that weekly schedules will be documented with an effective date and responsible person.

Please add the effective date the administrator ceased working 36-hour shifts and that no staff persons will work alone in the home for more than 12 hours.

Please update who will be reviewing/monitoring schedules weekly and on what date that began. Instead of regularly for monitoring, please change frequency to something measurable such as daily.

It would be helpful to include administrative protocols to comply with 2600.61 related to substitute personnel when regularly scheduled direct care staff are absent in the event of call-offs, staff emergencies, etc.

Plan of Correction

Accept [REDACTED] - 08/14/2026)

Effective August 5, 2026, the Administrator ceased working 36-hour shifts, and no staff person will work alone in the home for more than 12 consecutive hours. The Administrator and Supervisor will review staffing schedules once a week and monitor staffing daily to ensure compliance with 55 Pa. Code 2600.58(a) and 2600.61. In the event of a staff call-off or emergency, the Administrator or Supervisor will arrange coverage by a qualified substitute staff member to ensure continuous staffing and compliance with all applicable regulations.

Licensee's Proposed Overall Completion Date: 08/04/2026

Evidence of Completion

Implemented [REDACTED] 09/23/2026)

No evidence of completion required for submission, per direction of Licensing Director Brent Sutherland. Documentation will be maintained at the facility and made available to the Department upon request.

85e - Trash Outside Home**2. 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 10:41 a.m., there was an uncovered trash receptacle on the front porch.

Plan of Correction

Do Not Accept () - 07/30/2026

See attached. Effective immediately, the uncovered trash receptacle on the front porch was provided with a secure lid to prevent the penetration of insects and rodents. Staff have been instructed to keep all outdoor trash containers covered at all times, and the administrator will conduct routine inspections of the exterior of the home to ensure continued compliance with 55 Pa. Code 2600.85(e).

Licensee's Proposed Overall Completion Date: 07/23/2026

Update: 07/30/2026

Please add the date the receptacle was provided with a secure lid and the responsible person. Keep in mind the reader may not assume that was done on the day of the inspection, when the LIS was issued or received, or the date the POC was submitted.

Include the date staff received instruction and who provided the instruction. If all staff received these instructions, please state all staff.

Add the date the administrator will conduct inspections and, instead of routine inspection, please include measurable frequency such as weekly. Make sure the monitoring frequency is realistic; you can indicate administrator or designee for days or weeks you're not present.

Plan of Correction

Directed () - 08/14/2026

See attached. Effective immediately, the uncovered trash receptacle on the front porch was provided with a secure lid to prevent the penetration of insects and rodents. Staff have been instructed to keep all outdoor trash containers covered at all times, and the administrator or designee will conduct weekly inspections of the exterior of the home to ensure continued compliance with 55 Pa. Code 2600.85(e).

Directed: Within 5 days of receipt of the plan of correction - The administrator will ensure all staff received the instructions to keep all outdoor trash containers covered at all times and the initial, weekly administrator/designee inspection will be conducted.

Proposed Overall Completion Date: 08/04/2026

Directed Completion Date: 08/04/2026

Evidence of Completion

Implemented () - 09/23/2026

No evidence of completion required for submission, per direction of Licensing Director Brent Sutherland. Documentation will be maintained at the facility and made available to the Department upon request.

190a - Completion Medication Course**3. Requirements**

2600.

190a Completion Medication Course (continued)

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

Staff person A, the administrator, completed the initial Department approved medications administration course on [REDACTED]; however, has not had any annual medication record or medication administration observations for requalification. Staff person A administered medications to residents, including resident [REDACTED] and resident [REDACTED] to include the following dates and times in June of 2026:

- [REDACTED], and [REDACTED] at 8 a.m.
- [REDACTED] and [REDACTED] at 2 p.m.
- [REDACTED] and [REDACTED] at 5 p.m.
- [REDACTED] and [REDACTED] at 8 p.m.

Staff person B completed the initial Department approved medications administration course on [REDACTED]; however, has not had any annual medication administration observations for requalification. The only medication record reviews for staff person B were in August of 2024 and February 2025. Staff person B administered medications to residents, including resident [REDACTED] and resident [REDACTED], to include the following dates and times in June of 2026:

- [REDACTED] at 8 a.m.
- [REDACTED] and [REDACTED] at 2 p.m.
- [REDACTED], and [REDACTED] at 5 p.m.
- [REDACTED] and [REDACTED] at 8 p.m.

Repeated Violation

[REDACTED]

Plan of Correction**Do Not Accept** [REDACTED] - 07/30/2026)

Effective immediately, Staff Person A has provided documentation verifying that the required annual medication administration requalification has been completed and is in compliance with the Department's medication administration requirements. Staff Person B has been enrolled to repeat the Department approved Medication Administration Training Course and will not administer medications independently until all required training, competency testing, medication record reviews, and medication administration observations have been successfully completed. Going forward, the administrator will maintain a medication administration training log and monitor all initial and annual requalification dates to ensure all medication record reviews and medication administration observations are completed before they become due, preventing future lapses in compliance with 55 Pa. Code 2600.190(a).

Licensee's Proposed Overall Completion Date: 07/23/2026

Update: 07/30/2026

Please include the date staff person B will be finished repeating the initial medication administration training.

Please include the effective date for the training log with requalification dates and frequency of the monitoring such as monthly, every 2 months, etc.

Plan of Correction**Directed** [REDACTED] 08/14/2026)

Effective immediately, Staff Person A has provided documentation verifying that the required annual medication administration requalification has been completed and is in compliance with the Department's medication administration requirements. Staff Person B has been enrolled to repeat the Department-approved Medication

190a - Completion Medication Course (continued)

Administration Training Course and will not administer medications independently until all required training, competency testing, medication record reviews, and medication administration observation have been successfully completed and completion date is to be August 15, 2026. Going forward, the administrator will maintain a medication administration training log and monitor all initial and annual requalification dates to ensure all medication record reviews and medication administration observations are completed before they become due, preventing future lapses in compliance with 55 Pa. Code 2600.190(a). Pending the outcome of staff B test the date will be August 15, 2027 if successful. If not the log will be revised.

Directed: Within 5 days of receipt of the plan of correction - The administrator will have the training log established and monitoring of the training log shall occur at least monthly.

Proposed Overall Completion Date: 08/04/2026

Directed Completion Date: 08/04/2026

Evidence of Completion**Implemented** [REDACTED] **09/23/2026)**

Staff Person A's documentation verifying successful completion of the required annual medication administration requalification is maintained on file. Staff Person B [REDACTED] has two remaining tests that must be successfully completed. Documentation of [REDACTED] current grades and course progress is attached. Administrator [REDACTED] was unable to print the progress report from the training system; therefore, a video showing [REDACTED] current grades and progress was obtained as supporting documentation. [REDACTED] will work with qualified staff and will not independently administer medications until all required training, testing, medication record reviews, and medication administration observations are successfully completed. Administrator [REDACTED] has established the medication administration training log, which will be reviewed at least monthly. Upon successful completion, Staff Person B's next annual requalification due date will be entered on the log. If [REDACTED] does not successfully complete the requirements, the training log will be revised accordingly. I did upload the photos to Brent Sutherland to [REDACTED] [REDACTED] will have finished today 8/24/2026