

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

September 25, 2026

[REDACTED] OWNER
ANTHONY J PERONI
111 EASY STREET
UNIONTOWN, PA, 15401

RE: PERONI PERSONAL CARE HOME
111 EASY STREET
UNIONTOWN, PA, 15401
LICENSE/COC#: 42627

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/01/2026 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: PERONI PERSONAL CARE HOME

License #: 42627

License Expiration: 06/03/2027

Address: 111 EASY STREET, UNIONTOWN, PA 15401

County: FAYETTE

Region: WESTERN

Administrator

Name:

Phone:

Email:

Legal Entity

Name: ANTHONY J PERONI

Address: 111 EASY STREET, UNIONTOWN, PA, 15401

Phone:

Email:

Certificate(s) of Occupancy

Type: I 1

Date: 04/20/2010

Issued By: City of Uniontown

Staffing Hours

Resident Support Staff: 30

Total Daily Staff: 66

Waking Staff: 50

Inspection Information

Type: Full

Notice: Unannounced

BHA Docket #:

Reason: Renewal

Exit Conference Date: 09/01/2026

Inspection Dates and Department Representative

09/01/2026 On Site:

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 33

Residents Served: 30

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 10

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 30

Diagnosed with Mental Illness: 2

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 6

Have Physical Disability: 0

Inspections / Reviews

09/01/2026 - Full

Lead Inspector:

Follow Up Type: POC Submission

Follow Up Date: 09/18/2026

Inspections / Reviews (*continued*)

09/17/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/25/2026

Reviewer: [REDACTED]

Follow Up Type: POC Submission

Follow Up Date: 09/23/2026

09/21/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/25/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 09/25/2026

09/25/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/25/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

18 - Compliance With Laws**1. Requirements**

2600.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

The Care Facility Carbon Monoxide Alarms Standards Act, enacted on 9/23/16, requires carbon monoxide alarms to be installed in close proximity of, but not less than 15 feet from, any fossil fuel burning device or appliance. At the time of inspection, no carbon monoxide detector was located in close proximity of the gas dryer, located in the basement.

Plan of Correction

Accept () - 09/21/2026)

P-O-C- COMPLIANCE WITH LAWS

IMMEDIATE- [REDACTED] IMMEDIATELY WANT AND PICKED UP (AT OWNERS HOUSE SINCE [REDACTED] ALREADY HAD THEM PURCHASED) A CARBON MONOXIDE ALARM TO PLACE NEAR THE GAS DRYER (PLACED IN CORRECT AREA 9-2-2026)

MONITORING- [REDACTED] WILL ENSURE THAT ALL FOSSIL FUEL BURNING DEVICE OR APPLIANCE HAS A CARBON MONOXIDE DETECTOR LOCATED AT LEAST 15 FEET AWAY DURING MY MONTHLY WALK-THROUGH OF THE FACILITY (1ST OF EVERY MONTH)

LONGTERM- [REDACTED] WILL ENSURE THAT ALL FOSSIL FUEL BURNING DEVICE OR APPLIANCE HAS A CARBON MONOXIDE DETECTOR LOCATED AT LEAST 15 FEET AWAY DURING MY MONTHLY WALK-THROUGH OF THE FACILITY (THE 1ST OF EVERY MONTH)

Licensee's Proposed Overall Completion Date: 09/21/2026

Implemented () - 09/25/2026)

42s - Privacy**2. Requirements**

2600.

- 42.s. A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.

Description of Violation

At 11:22am, there was no operable lock on the 2nd floor common bathroom door to provide privacy while in use.

Plan of Correction

Accept () - 09/21/2026)

P-O-C- PRIVACY

IMMEDIATE- [REDACTED] IMMEDIATELY CALLED OUR MAINTENANCE TEAM TO HAVE THEM INSTALL A NEW DOOR LOCK ON 9-5-2026 (THE DATE THE NEW LOCK WAS INSTALLED WAS 9-5-2026)

MONITORING- [REDACTED] WILL ENSURE ALL PRIVACY DOORS (BATHROOMS) HAVE AN OPERABLE LOCK DURING MY MONTHLY WALK-THROUGH OF THE FACILITY (THE 1ST OF EVERY MONTH)

42s Privacy (continued)

LONGTERM [REDACTED] WILL ENSURE ALL PRIVACY DOORS (BATHROOMS) HAVE AN OPERABLE LOCK DURING MY MONTHLY WALK THROUGH OF THE FACILITY (THE 1ST OF EVERY MONTH)

Licensee's Proposed Overall Completion Date: 09/21/2026

Implemented ([REDACTED]) - 09/25/2026)

101j7 - Lighting/Operable Lamp

3. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

At 11:24am, no operable lamp or other source of lighting was present at resident #1's bedside.

Plan of Correction

Accept ([REDACTED]) - 09/21/2026)

P O C LIGHTING/ OPERABLE LAMP

IMMEDIATE [REDACTED] IMMEDIATELY (9 2 2026) GAVE THE RESIDENT A FLASHLIGHT TO LEAVE AT BED SIDE SINCE RESIDENT WANTED THE LAMP REMOVED FROM NIGHTSTAND TO DRESSER ACROSS THE ROOM WHEN [REDACTED] MOVED INTO THAT ROOM

MONITORING [REDACTED] WILL ENSURE ALL RESIDENTS HAVE SOME FORM OF LIGHT (PUSH LIGHT OR FLASHLIGHT ON NIGHTSTAND) IF THEY WISH TO NOT HAVE A LAMP AT BEDSIDE (THIS IS SOMETHING THAT IS ALREADY ADDED ON THE MONTHLY WALK THROUGH CHECK LIST...CHECKING FOR LAMP AND THAT IT WORKS PROPERLY) (ALL RESIDENTS ROOMS GET CHECKED FOR CHAIR, LAMP, MIRROR, GARBAGE CAN AND EMERGENCY NUMBERS THE 1ST OF EVERY MONTH)

LONGTERM [REDACTED] WILL ENSURE ALL RESIDENTS HAVE SOME FORM OF LIGHT (PUSH LIGHT OR FLASHLIGHT ON NIGHTSTAND) IF THEY WISH TO NOT HAVE A LAMP AT BEDSIDE

Licensee's Proposed Overall Completion Date: 09/21/2026

Implemented ([REDACTED]) - 09/25/2026)

121a - Unobstructed Egress

4. Requirements

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

At 11:45am, numerous items were present in front of the basement emergency exit door, to include the following:

121a Unobstructed Egress (continued)

- A door that was off the hinges and leaning against numerous boxes, which was protruding in front of the emergency exit door
- A large box directly on the floor in front of the emergency exit door

Plan of Correction**Directed ([REDACTED] - 09/21/2026)****P O C UNOBSTRUCTED EGRESS**

IMMEDIATE [REDACTED] IMMEDIATELY CALLED THE MAINTANCE TEAM (9 2 2026) TO EITHER SWITCH OUT THE DOOR AS PLANNED OR REMOVE THE DOOR TO A DIFFERENT AREA. ALSO, [REDACTED] AND ANOTHER CO WORKER CLEANED OUT THE AREA AND TOOK BOXES TO THE DUMPSTER (9 2 2026) MAINTANCE CAME ON 9 5 2026 AND REMOVED THE DOOR OUT OF THE WAY UNTIL IT GETS INSTALLED (NO DATE ON THAT YET)

MONITORING [REDACTED] WILL ENSURE THAT I HAVE A DESIGNATED TABLE PLACED OUT OF THE WAY OF THE DOORWAY TO PLACE ALL BOXES SINCE THAT'S THE DOOR TO THE DUMPSTER SO THEY ARE OUT OF THE WALK AWAY AND DOOR WAY, ALSO ON 9 2 2026 HAD A TALK WITH STAFF MEMEBERS ABOUT THE IMPORTANCE OF HAVING ALL EXITS, DOORWAYS AND WALK WAYS CLEAR (DIRECTED: Documentation of the staff education shall be kept. [REDACTED] 9/21/26)

LONGTERM [REDACTED] WILL ENSURE THAT I HAVE A DESIGNATED TABLE PLACED OUT OF THE WAY OF THE DOORWAY TO PLACE ALL BOXES SINCE THAT'S THE DOOR TO THE DUMPSTER SO THEY ARE OUT OF THE WALK AWAY AND DOOR WAY, ALSO I WILL ENSURE ALL STAFF MEMBERS TO PLACE BOXES ON TABLE OUT OF ANY WALK WAY OR DOORWAY

DIRECTED: Beginning on 9/24/26: The administrator/designee shall inspect all stairways, hallways, doorways, passageways and egress routes from rooms and from the building daily for 1 week then weekly thereafter to ensure they are unlocked and unobstructed. [REDACTED] 9/21/26

Proposed Overall Completion Date: 09/21/2026

Directed Completion Date: 09/24/2026

Implemented ([REDACTED] - 09/25/2026)