Pennsylvania
Department of Human Services

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: OCTOBER 30, 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 October 6, 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

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 - PUBLIC

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: *1* **Total Daily Staff**: *27* **Waking Staff**: *20*

Inspection Information

Type: *Partial* **Notice**: *Unannounced* **BHA Docket #**:

Reason: *Complaint, Incident, Monitoring* **Exit Conference Date**: *10/06/2026*

Inspection Dates and Department Representative

10/06/2026 - On-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *42* **Residents Served**: *25*

Secured Dementia Care Unit

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

Hospice

Current Residents: *1*

Number of Residents Who:

Receive Supplemental Security Income: *20* **Are 60 Years of Age or Older**: *23*

Diagnosed with Mental Illness: *21* **Diagnosed with Intellectual Disability**: *3*

Have Mobility Need: *1* **Have Physical Disability**: *0*

Inspections / Reviews

10/06/2026 - Partial

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

85a - Sanitary Conditions

1. Requirements

2600.
85.a. Sanitary conditions shall be maintained.

Description of Violation

At approximately 10:31 a.m., there were no paper towels or other means to dry hands in the employee bathroom located next to the East A-Hall exit.

At approximately 10:34 a.m. there were no paper towels or other means to dry hands at the sink in the A-Hall East full bathroom.

At approximately 10:39 a.m. there were no paper towels or other means to dry hands at the sink in the A-Hall West full bathroom.

Plan of Correction ***Directed [redacted] - 10/22/2026)***

Within one day of receipt of the plan of correction: The administrator or designated staff person shall place a sanitary means of hand drying in the three bathrooms cited in the violation. [redacted] 10/22/26

Within one day of receipt of the plan of correction: The administrator or designated staff person shall audit all bathrooms in the home to ensure there is a sanitary means of hand drying. [redacted] 10/22/26

Within five 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 maintain compliance. Documentation of education shall be maintained in accordance with regulation 2600.65i. [redacted] 10/22/26

Within five days of receipt of the plan of correction: The administrator or designated staff person shall audit the home daily to ensure there is a sanitary means for hand drying at all sinks. Documentation of audits shall be kept. [redacted] 10/22/26

Directed Completion Date: *10/27/2026*

85b - Infestation

2. Requirements

2600.
85.b. There may be no evidence of infestation of insects or rodents in the home.

Description of Violation

At approximately 11:35 a.m., in the home's laundry room, there were as many as nine bed bug carcasses found in the lint screen and in the area of the Hotpoint dryer where the lint screen inserts into the machine.

At approximately 11:42 a.m. there were three live bed bugs and the carcasses of three dead bed bugs found on the fitted sheets of the mattress on the left side of the room belonging to resident #1 in resident room #4.

Repeat Violation 4/21/26, 3/24/26 et. al.

Plan of Correction ***Directed [redacted] - 10/22/2026)***

Within one day of receipt of the plan of correction: The administrator shall contact a professional insect control company to conduct an assessment of the entire home. Following the assessment, the administrator will

85b - Infestation (continued)

immediately follow the most proactive services and recommendations offered by the insect control company to eradicate the infestation. [redacted] *10/29/26*

Within five days of receipt of the plan of correction: The administrator shall educate all staff persons on signs of bed bug infestation and monitoring for signs of infestation. Documentation shall be kept in accordance with Regulation 2600.65i. [redacted] *10/22/26*

Within fifteen days of receipt of the plan of correction: The administrator shall audit the home weekly for potential infestation and signs of infestation. Documentation of audits shall be kept. [redacted] *10/22/26*

Directed Completion Date: *10/27/2026*

102i - Soap Dispenser

3. Requirements

2600.
102.i. A dispenser with soap shall be provided within reach of each bathroom sink. Bar soap is not permitted unless there is a separate bar clearly labeled for each resident who shares a bathroom.

Description of Violation

At approximately 10:39 a.m., there was no soap in the A-Hall West bathroom.

Plan of Correction ***Directed*** [redacted] ***- 10/22/2026)***

Within one day of receipt of the plan of correction: The administrator or designated staff person shall place a soap dispenser at the A-Hallway West bathroom sink. [redacted] *10/22/26*

Within five 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 maintain compliance. Documentation of education shall be maintained in accordance with regulation 2600.65i. [redacted] *10/22/26*

Within five days of receipt of the plan of correction: The administrator or designated staff person shall audit the home daily to ensure a dispenser with soap shall be provided within reach of each bathroom sink. Documentation of audits shall be kept. [redacted] *10/22/26*

Directed Completion Date: *10/27/2026*

162c - Menus Posted

4. Requirements

2600.
162.c. Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

Description of Violation

On 10/6/26 at 10:25 a.m., the menus posted were for the previous week ending on 10/3/26 and the current week ending on 10/10/26.

Plan of Correction ***Directed*** [redacted] ***- 10/22/2026)***

Within one day of receipt of the plan of correction: The administrator or designated staff person shall post the weekly menu and the week in advance menu in a conspicuous and public place in the home. [redacted] *10/22/26*

162c - Menus Posted (continued)

Within five 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 maintain compliance with the regulation. Documentation of education shall be maintained in accordance with regulation 2600.65i. 10/22/26

Within five days of receipt of the plan of correction: The administrator or designated staff person shall audit the home daily to ensure each weekly menu and the week in advance menu is posted in a conspicuous and public place in the home. Documentation of audits shall be kept. 10/22/26

Directed Completion Date: *10/27/2026*

187b - Date/Time of Medication Admin.

5. 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 #1 is prescribed Nicotine 14mg/24HR patch, apply one patch topically each morning to a clear, dry, hairless area, rotate sites and remove old patch at bedtime. However, on 9/11/26 at 8:00 a.m., direct care staff person A administered the Nicotine patch to resident #1 but did not document the resident's September 2026 medication administration record at the time of administration, that area was left blank.

Resident #2 is prescribed APAP 500mg caplet, take by mouth two tablets (1,000mg) three times daily. However, on 9/3/26 at 10:00 p.m., resident #2 was administered the two APAP 500mg caplets by the home's administrator, direct care staff person B and the resident's September 2026 medication administration was not documented at the time of administration and was left blank.

Resident #2 is prescribed APAP 500mg caplet, take by mouth two tablets (1,000mg) three times daily. However, on 9/26/26 at 10:00 p.m., resident #2 was administered the two APAP 500mg caplets by direct care staff person C and the resident's September 2026 medication administration record was not documented at the time of administration and was left blank.

Resident #3 is prescribed Polyethylene Glycol Powder, mix 17 grams in eight ounces of liquid and drink by mouth daily. However, on 9/11/26 at 8:00 a.m., resident #3 was administered the 17 grams of Polyethylene Glycol in eight ounces of liquid by direct care staff person A and the resident's September 2026 medication administration record was not documented at the time of administration and was left blank.

Repeat Violation 5/28/26, 4/21/26, 3/24/26 et. al., 11/17/25, 8/20/25 et. al.

Plan of Correction ***Directed - 10/22/2026)***

Within five 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 home's procedures for medication administration, including documentation. Documentation of education shall be kept in accordance with Regulation 2600.65i. 10/22/26

Within five 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

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

the home's procedures for medication administration and the regulations are followed. Documentation of observations shall be kept. [redacted] 10/22/26

Directed Completion Date: *10/27/2026*

187d - Follow Prescriber's Orders

6. Requirements

2600.
187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #1 is prescribed Anoro Ellipta Inhaler 62.5-25mcg, inhale by mouth every day. However, on 9/11/26 at 8:00 a.m., resident #1 was not administered the Anoro Ellipta Inhaler.

Repeat Violation 5/28/26, 4/21/26, 3/24/26 et. al., 11/17/25

Plan of Correction ***Directed [redacted] - 10/22/2026)***

187d
Within one day of receipt of the plan of correction: The administrator shall notify the resident and the resident's designated person of the medication error cited in the violation. Documentation of notifications shall be kept. [redacted] 10/22/26

Within one day of receipt of the plan of correction: The administrator shall notify the prescriber of the medication error cited in the violation. Documentation of notification shall be kept. [redacted] 10/22/26

Within one day of receipt of the plan of correction: The administrator shall document the medication error as part of the resident's permanent record. [redacted] 10/22/26

Within five 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] 10/22/26

Within five 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 homes procedures and the regulations for medication administration are followed. Documentation of observations shall be kept. [redacted] 10/22/26

Within one day of receipt of the plan of correction: The administrator shall file an incident report for each medication error. [redacted] 10/22/26

Directed Completion Date: *10/27/2026*