



Pennsylvania
Department of Human Services

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: NOVEMBER 5, 2025

[REDACTED]
Country Manor PCH LP
111 Altmeyer Drive
Kittanning, Pennsylvania 16201

RE: Country Manor
License #: 44629

Dear [REDACTED]:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department), licensing inspection on September 18, 2025 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,

A handwritten signature in cursive script that reads "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

Facility Information

Name: *COUNTRY MANOR* License #: *44629* License Expiration: *12/11/2024*
Address: *111 ALTMAYER DRIVE, KITTANNING, PA 16201*
County: *ARMSTRONG* Region: *WESTERN*

Administrator

Name: [REDACTED]

Legal Entity

Name: *COUNTRY MANOR PCH LP*
Address: *111 ALTMAYER DRIVE, KITTANNING, PA, 16201*
Phone: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *06/20/1996* Issued By: *Dept L & I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *16* Waking Staff: *12*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint, Monitoring* Exit Conference Date: *09/18/2025*

Inspection Dates and Department Representative

09/18/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *50* Residents Served: *16*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *16* Are 60 Years of Age or Older: *10*
Diagnosed with Mental Illness: *15* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *0* Have Physical Disability: *1*

Inspections / Reviews

09/18/2025 - Partial

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

42s - Privacy

1. 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

A motion censored camera was observed in the dining room which had viewing and recording capability.

Plan of Correction

Directed [REDACTED] - 10/31/2025)

Directed:

Within 24 hours of receipt of the plan of correction the administrator or designated staff person shall remove or disable the camera in the dining room.

[REDACTED] 10/30/25

Directed:

Within 7 days of receipt of the plan of correction, and then weekly for six months, the administrator or designated staff person shall inspect all cameras at the facility and ensure they are not in violation of the regulation.

[REDACTED] 10/30/25

Directed:

Within 7 days of receipt of the plan of correction the administrator or designated staff person shall train all staff on Regulation 42s with an emphasis on resident privacy.

[REDACTED] 10/30/25

Directed Completion Date: 11/19/2025

42x - Safeguard

2. Requirements

2600.

42.x. A resident has the right to a system to safeguard a resident's money and property.

Description of Violation

Resident #1 left the home on [REDACTED]/25 and was admitted into the hospital and then was discharged from the home on [REDACTED]/25 to a higher level of care. However, staff person A, the home's Administrator, refused to give the resident's personal property to [REDACTED] family at discharge until the resident paid half of the owed \$3,114.60.

Plan of Correction

Directed [REDACTED] - 10/31/2025)

Directed:

Within 24 hours of receipt of the plan of correction the administrator or designated staff person shall return all of Resident 1's property.

[REDACTED] 10/30/25

Directed:

Within 7 days of receipt of the plan of correction, the administrator or designated staff person shall review the records of any residents discharged in 2025 and 2024 to determine if any former resident's property is being held by the facility.

[REDACTED] 10/30/25

Directed:

42x - Safeguard (continued)

Within 7 days of receipt of the plan of correction, the administrator or designated staff person shall ensure that any and all personal property is returned to any former residents.

█. 10/30/25

Directed Completion Date: 11/19/2025

54a - Direct Care Staff

3. Requirements

2600.

54.a. Direct care staff persons shall have the following qualifications:

- 1. Be 18 years of age or older, except as permitted in subsection (b).
- 2. Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry.
- 3. Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary personal care services with reasonable skill and safety.

Description of Violation

Staff person B, hired █/25, did not have a high school diploma, GED diploma, or active registration status on the Pennsylvania nurse aide registry. The documentation in staff person B's record, included a diploma from an institution that is not accredited nor recognized.

Plan of Correction

Directed █ - 10/31/2025)

Directed:

Within 24 hours of receipt of the plan of correction the administrator or designated staff person shall ensure that staff person B does not provide direct care services until they have attained the credentials required in the regulation.

█. 10/30/25

Directed:

Within 7 days of receipt of the plan of correction, the administrator or designated staff person shall review all employee records and ensure that they all meet the education requirements required by the regulation.

█. 10/30/25

Directed:

Within 7 days of receipt of the plan of correction the administrator or designated staff person shall train all staff on Regulation 54a.

█. 10/30/25

Directed Completion Date: 11/19/2025

60a - Staff/Support Plan

4. 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

On multiple date and time, 16 residents were present in the home. During this time, no staff persons were present who were qualified to administer medications; including staff person B who did not have a high school diploma, GED diploma, or active registration status on the Pennsylvania nurse aide registry, and was not qualified to complete the Department-approved medication administration course, administered medications to the following residents:

60a - Staff/Support Plan (continued)

Resident #2 was prescribed Albuterol Sul HFA 90mcg, inhale 2 puffs by mouth every 4-6 hours as needed for cough/wheezing administered on 8/12/25 at 6:32 a.m. and 8/13/25 at 2:39 p.m., and Diclofenac Sodium 1% gel, apply topically to shoulders every 6 hours as needed for pain on 8/13/25 at 2:41 p.m.

Resident #3, prescribed Escitalopram 20mg, 1 tablet by mouth once daily for mood disorder, administered on 8/1/25, 8/4/25, 8/5/25, 8/8/25, 8/9/25, 8/10/25, 8/12/25, 8/13/25, 8/15/25

Resident #4, prescribed Topiramate 50mg, 1 tablet daily for epilepsy and recurrent seizures, administered on 8/1/25, 8/4/25, 8/5/25, 8/9/25, 8/10/25

Resident #5, prescribed Clonazepam 0.5mg, 1 tablet by mouth twice daily for anxiety, and Phenytoin sod 40mg, take 2 capsules by mouth 3 times a day for epilepsy and recurrent seizures, administered on 8/1/25, 8/4/25, 8/5/25, 8/8/25, 8/9/25, and 8/10/25

REPEAT VIOLATION: 6/27/25 et al

Plan of Correction

Directed [redacted] - 10/31/2025)

Directed:

Within 24 hours of receipt of the plan of correction the administrator or designated staff person shall ensure that medications are passed only by qualified personnel as required by the regulation.

[redacted]. 10/30/25

Directed:

Within 7 days of receipt of the plan of correction, the administrator or designated staff person shall review all employee records and ensure that they all staff responsible for passing medication meet the education requirements as required by the regulation.

[redacted]. 10/30/25

Directed:

Within 7 days of receipt of the plan of correction the administrator or designated staff person shall train all staff on Regulation 60a.

[redacted]. 10/30/25

Directed Completion Date: 11/19/2025

162b - Missed Meals

5. Requirements

2600.

162.b. When a resident misses a meal, food adequate to meet daily nutritional requirements shall be available and offered to the resident.

Description of Violation

Resident and staff interviews indicated if a resident misses breakfast, they are only able to request a piece of toast; which does not meet the daily nutritional requirements. Breakfast is served daily from 8:00 a.m.-8:30 a.m. On 8/8/25, at approximately 8:58 a.m., resident #6, was late getting out of [redacted] room and missed breakfast but arrived timely to

162b - Missed Meals (continued)

receive her 8:00 a.m. medication. The staff only offered the resident one piece of dry toast.

Plan of Correction**Directed (█ - 10/31/2025)****Directed:**

Within 24 hours of receipt of the plan of correction the administrator or designated staff person shall ensure that appropriate alternate full meals are offered to any residents who do not want the main meal or who arrive to the dining room after the main meal is served.

█ 10/30/25

Directed:

Within 7 days of receipt of the plan of correction, the administrator or designated staff person shall train all staff on regulation 162 b specifying that when a resident misses a meal, food adequate to meet daily nutritional requirements shall be available and offered to the resident.

█ 10/30/25

Directed:

Within 7 days of receipt of the plan of correction, the administrator or designated staff person shall ensure that all residents are aware of their rights to meals.

█ 10/30/25

Directed Completion Date: 11/19/2025

162c - Menus Posted**6. 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

The menu's dated 9/22/25-9/28/25 and 9/29/25-10/5/25 indicated "Chef Choice" is served every Friday at lunch; however, the menu did not indicate chef choice is any remaining previously prepared food from that week nor did the menus indicate the specific food being served.

Plan of Correction**Directed (█ - 10/31/2025)****Directed:**

Within 24 hours of receipt of the plan of correction the administrator or designated staff person shall ensure that there are menus listing the specific food being served at each meal to include alternate items, 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.

█ 10/30/25

Directed:

Within 7 days of receipt of the plan of correction, the administrator or designated staff person shall train all staff on regulation 162 c.

█ 10/30/25

Directed:

Within 7 days of receipt of the plan of correction, the administrator or designated

162c - Menus Posted (continued)

staff person shall inspect the menu to ensure that it contains all of the information required in the regulation.

█. 10/30/25

Directed Completion Date: 11/19/2025

164a - Withholding Meals

7. Requirements

2600.

164.a. A home may not withhold meals, beverages, snacks or desserts as punishment. Food and beverages may be withheld in accordance with prescribed medical or dental procedures.

Description of Violation

The home's meal policy reads the residents must come to the dining room for all meals dressed in non-pajama clothing. If the residents do not come to the dining room at the specific time for meals (i.e. breakfast 8:00 a.m. to 8:30 a.m., Lunch 12:00 p.m. to 1 :00 p.m., and dinner 5:00 p.m. – 6:00 p.m.) they are not served a meal. On multiple dates including 8/8/25 at 9:00 a.m., the staff on duty were directed to refuse to provide a meal to residents after 9:00 a.m., to include resident #6 who did not come to breakfast on time. This resident was provided with one piece of dry toast.

Plan of Correction

Directed █ - 10/31/2025)

Directed:

Within 24 hours of receipt of the plan of correction the administrator or designated staff person shall amend the policy to comply with the regulation and specify that meals are not to be withheld from residents.

█. 10/30/25

Directed:

Within 7 days of receipt of the plan of correction, the administrator or designated staff person shall train all staff on regulation 164a.

█. 10/30/25

Directed:

Within 7 days of receipt of the plan of correction, the administrator or designated staff person shall inform all residents that meals may not be withheld in accordance with regulation 164a.

█. 10/30/25

Directed Completion Date: 11/19/2025

187c - Refusal of Medication

8. Requirements

2600.

187.c. If a resident refuses to take a prescribed medication, the refusal shall be documented in the resident's record and on the medication record. The refusal shall be reported to the prescriber within 24 hours, unless otherwise instructed by the prescriber. Subsequent refusals to take a prescribed medication shall be reported as required by the prescriber.

Description of Violation

Resident #4 refused the following medications on multiple dates and times; however, these refusals were not reported to the physician within 24 hours:

187c - Refusal of Medication (continued)

Bupirone HCL 10mg, 1 tablet three times a day on 8/8/25 and 8/10/25 at 8:00 a.m..
Eliquis 5mg, 1 tablet by mouth twice a day on 8/8/25 and 8/10/25 at 8:00 a.m..
Escitalopram 20mg, 1 tablet once daily on 8/8/25 and 8/10/25 at 8:00 a.m..
Metformin 500mg, 1 tablet by mouth twice a day once daily on 8/8/25 and 8/10/25 at 8:00 a.m..
Nabumetone 750mg, 1 tablet by mouth twice daily on 8/8/25 and 8/10/25 at 8:00 a.m..
Topiramate 50mg, 1 tablet once daily on 8/8/25 and 8/10/25 at 8:00 a.m..

Resident #5 refused the following medications, on multiple dates and times; however, these refusals were not reported to the physician within 24 hours:

Clobetasol 0.05% cream, apply topically to rash twice daily on 8/19/25 and 8/24/25 at 8:00 a.m. and at 8:00 p.m. on 8/1/25, 8/4/25, 8/6/25, 8/7/25, 8/13/25, 8/16/25, 8/17/25, 8/19/25, 8/21/25, 8/22/25, 8/23/25, 8/24/25, and 8/29/25
Olanzapine 5mg, 1 tablet by oral route 2 times every day for depression at 8:00 a.m. on 8/27/25 and 8/29/25 and at 8:00 p.m. on 8/1/25, 8/16/25, 8/23/25, 8/24/25, and 8/29/25

REPEAT VIOLATION:12/4/25 et al, 12/27/24

Plan of Correction

Directed [redacted] - 10/31/2025)

Directed:

Within 24 hours of receipt of the plan of correction, the administrator or designated staff person shall inform the prescriber for resident #4 and #5 of their medication refusals.

[redacted] 10/30/25

Directed:

Within 7 days of receipt of the plan of correction the administrator or designated staff person shall review all medication refusals and ensure that they are reported to the prescriber.

[redacted]. 10/30/25

Directed:

Within 7 days of receipt of the plan of correction, the administrator or designated staff person shall train all employees responsible for passing medications on the requirements listed in 187c with an emphasis on procedures for informing the prescriber of refused medications.

[redacted] 10/30/25

Directed Completion Date: 11/19/2025

190a - Completion Medication Course

9. 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

Staff person B, hired [redacted]/25, administered medications to residents, on the following dates; however, this staff person did not have a high school diploma, GED diploma, or active registration status on the Pennsylvania nurse aide registry; as required prior to the completion of a Department approved medication administration course:

190a - Completion Medication Course (continued)

Resident #3, prescribed Escitalopram 20mg, 1 tablet by mouth once daily for mood disorder, administered on 8/1/25, 8/4/25, 8/5/25, 8/8/25, 8/9/25, 8/10/25, 8/12/25, 8/13/25, 8/15/25

Resident #4, prescribed Topiramate 50mg, 1 tablet daily for epilepsy and recurrent seizures, administered on 8/1/25, 8/4/25, 8/5/25, 8/9/25, 8/10/25

Resident #5, prescribed Clonazepam 0.5mg, 1 tablet by mouth twice daily for anxiety, and Phenytoin sod 40mg, take 2 capsules by mouth 3 times a day for epilepsy and recurrent seizures, administered on 8/1/25, 8/4/25, 8/5/25, 8/8/25, 8/9/25, and 8/10/25

Plan of Correction**Directed** [REDACTED] - 10/31/2025)**Directed:**

Within 24 hours of receipt of the plan of correction, the administrator or designated staff person shall ensure that medications are only passed by fully qualified staff.

[REDACTED] 10/30/25**Directed:**

Within 7 days of receipt of the plan of correction the administrator or designated staff person shall review the credentials of all staff responsible for passing medications to ensure they are fully qualified as described in the regulation

[REDACTED] 10/30/25**Directed:**

Within 7 days of receipt of the plan of correction, the administrator or designated staff person shall train all employees responsible for passing medications on the requirements listed in 190a.

[REDACTED]. 10/30/25**Directed Completion Date: 11/19/2025**