



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

DEC 20 2013

Ms. Susan Weinstein, Executive Director  
DS Realty Ventures LLC  
One Easy Living Drive  
Hunker, Pennsylvania 15639

RE: Easy Living Country Estates  
License #: 442630

Dear Ms. Weinstein:

As a result of the Department of Public Welfare's licensing inspection on September 27, 2013 and September 30, 2013, of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Your regular license for the period December 25, 2013 to December 25, 2014 was issued on September 1, 2013. Your regular license remains in good standing.

Sincerely,

Matthew J. Jones  
Acting Director

Enclosure  
License Inspection Summary

**VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: EASY LIVING COUNTRY ESTATES		License Number: 44263
Address: ONE EASY LIVING DRIVE, HUNKER, PA 15639		County: Westmoreland
Administrator: Connie Lillock		Region: WEST
Legal Entity Name: DS REALTY VENTURES LLC		<b>RECEIVED</b>
Legal Entity Address: ONE EASY LIVING DRIVE, HUNKER, PA 15639		
Certificate(s) of Occupancy 1-2 01/10/2011 Hampfield TWP		DEC 3 2013 WEST REGION FIELD OFFICE Human Services Licensing
<b>Staffing Hours</b>		
Resident Support: 0	Total Daily Staff: 62	Working Staff: 47
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 09/27/2013: McConnell, Deb; Mandock, Nancy 09/30/2013: McConnell, Deb		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 60 Number of Residents Served: 42 Secured Dementia Care Unit In Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 13 Number of Hospice Residents in past year: 20		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 43 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 20 Have a Physical Disability: 2

DEC 3 2013

Violation Report: 44263 - 09/27/2013 - McConnell, Deb  
PCH Name: EASY LIVING COUNTRY ESTATES

WEST REGION FIELD OFFICE  
Human Services Licensing

**1. REGULATION 55 Pa.Code §2600**

2600.3(c) - The personal care home shall post the current license, a copy of the current licensing inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

**2a. DESCRIPTION OF VIOLATION**

On 9/27/13, the home's violation report, dated 7/26/13, was not posted in a conspicuous and public place in the home.

**3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)**

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.



Page 2

**Correction Plan for violation 2600.3 c**

A copy of Easy Living Country Estates violation report and plan of correction dated 7-26-13 was replaced immediately on 9-27-13 in a "conspicuous and public place in the personal care home" (posted in survey sleeve protector on wall display of required regulatory forms and Certificate of Compliance).

Plan to prevent a similar violation from occurring again:

- 1) All violation/survey reports will continue to be posted at all times in a conspicuous and public place at Easy Living Country Estates.
- 2) Easy Living Country Estates's personal care home administrator will monitor all regulated postings weekly to verify their presence in the appropriate site.

Repeat Violation: No	Date(s) of Previous Violation(s):			
Signature of Legal Entity Representative (Required on EVERY Page)				
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)				Date
Connie A. Lilliock, PCHA				12-3-13
<b>DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!</b>				
The above plan of correction is approved as of		Plan of correction implementation status as of		
12/4/13 (Date)		12/4/13 (Date)		
The above plan of correction was approved by		<input checked="" type="checkbox"/> Fully Implemented  <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented		
 (Initials)				

DEC 3 2013

Page 3 of 9

Violation Report: 44263 - 09/27/2013 - McConnell, Deb  
PCH Name: EASY LIVING COUNTRY ESTATES

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.52 - Hiring, retention and utilization of staff persons shall be in accordance with the Older Adult Protective Services Act (35 P.S. §§ 10225.101-10225.5102) and 6 Pa.Code Chapter 15 (relating to protective services for older adults) and other applicable regulations.

2a. DESCRIPTION OF VIOLATION

The home requested a Federal Bureau of Investigation (FBI) criminal background check for direct care staff person A, hired 8/26/13. However, as of 9/27/13, the home has not received a result of the criminal background request. Staff person A has been providing unsupervised direct care to residents of the home.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Correction Plan for violation 2600.52

Staff person A was hired 8-26-13 as dietary aide, a non-direct care position at Easy Living Country Estates. Cooks and dietary aides work in the kitchen only while residents are in the dining room. The four direct-care staff persons assigned each shift take the residents to the dining room and remain there throughout mealtimes. Kitchen staff prepares and plates the food and the direct-care staff persons (resident assistants) serve the residents and feed or assist with the meals as needed. One resident assistant is to always remain in the dining room as long as residents are present and thus kitchen staff is never alone with ELCE residents.

The shifts that staff person A worked from 8-26-13 to 9-1-13 were all training hours in the kitchen working with a seasoned employee. September 4<sup>th</sup> and 9<sup>th</sup> 2013, staff person A was enlisted as the 4<sup>th</sup> staff person working 11-7 shift at ELCE to meet the emergency evacuation of residents provision stated in the violation correction plan of 7-26-13. Staff person A was present at ELCE those nights only to meet that emergency evacuation measure and three direct-care staff persons were also present to provide direct care to the residents. All other shifts (2PM-8PM in the kitchen) worked the month of September by staff person A were non-direct care staff hours.

Staff person A completed the direct care staff training course and competency test on 9-13-13 and began training as a resident assistant daylight shift 9-17-13 and on 11-7 shift 9-20-13. Staff person A was assigned to work with and under the direct supervision of the other three direct-care staff persons assigned each 11-7 shift. Management cannot guarantee Staff person A was never alone with a resident, but was always scheduled to work with other direct-care staff persons. Staff person A's FBI fingerprint based record check result "No Record Exists" from ██████████ Director Division of Operations and Quality Management, Commonwealth of Pennsylvania, Department of Public Welfare was postmarked 10-1-13 and received ELCE on 10-3-13.

Plan to ensure hiring, retention and utilization of staff persons at ELCE is always in accordance with the Older Adult Protective Services Act, 6 PA Code Chapter 15 and other applicable regulations:

- 1) Easy Living Country Estates will continue to schedule any new ELCE employee who doesn't meet the two-year Pennsylvania residency requirement resident care services only under the direct supervision of another direct-care staff person, the administrator or resident care coordinator until receipt of their FBI fingerprint clearance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Cornie D. Lilliock, PCHA*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Cornie D. Lilliock, PCHA* Date *12-3-13*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 12/4/13 (Date)

Plan of correction implementation status as of 12/4/13 (Date)

The above plan of correction was approved by [Signature] (Initials)

- Fully Implemented *[Signature]*
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

**RECEIVED**

Violation Report: 44263 - 09/27/2013 - McConnell, Deb  
 PCH Name: EASY LIVING COUNTRY ESTATES

DEC 3 2013

1. REGULATION 55 Pa.Code §2600  
 2600.85(a) - Sanitary conditions shall be maintained.

WEST REGION FIELD OFFICE  
 Human Services Licensing

2a. DESCRIPTION OF VIOLATION

On 9/27/13, there was an excessive accumulation of dried food particles on the bottom shelves of the 2 kitchen cabinets near the ice cream chest. Also, there was a sticky buildup of grease in the drawers above these cabinets.

On 9/27/13, there were multiple layers of burnt food on the interior of the convection oven.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)  
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Correction Plan for violation 2600.85 (a)

The convection oven was cleaned by [redacted] PCHA on Sunday, 9-29-13 and approved by Debbie McConnell, licensing representative upon her return 9-30-13. General cleaning in the kitchen was performed by dietary and housekeeping staff the week of 9-30-13.

All ELCE kitchen cupboards, equipment, convection oven, freezers and refrigerators were commercially cleaned by [redacted] the week of 10-7-13.

All kitchen and housekeeping staff were retrained on their responsibility and the need to maintain cleanliness and sanitation in all areas of the dietary kitchen and dining room.

Plan to prevent a similar violation from occurring again:

- 1) Dietary and housekeeping staff will follow the cleaning schedule for the kitchen and dining room.
- 2) Complete commercial cleaning of the kitchen (including the convection oven) will be scheduled quarterly or as needed.
- 3) Compliance and maintenance with kitchen sanitation and the cleaning schedule will be documented as part of ELCE Quality Management Report.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative (Required on EVERY Page) *Connie D. Lilliock, PCHA*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Connie D. Lilliock, PCHA* Date *12-3-13*

**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of 12/4/13  
 (Date)

Plan of correction implementation status as of 12/4/13  
 (Date)

The above plan of correction was approved by \_\_\_\_\_  
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 44263 - 09/27/2013 - McConnell, Deb  
PCH Name: EASY LIVING COUNTRY ESTATES

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Code §2600  
2600.103(e) - Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

2a. DESCRIPTION OF VIOLATION  
On 9/30/13, there was a large, undated, plastic container of beets in the kitchen refrigerator.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)  
Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Page 5

Correction Plan for violation 2600.103 (e)

The container of beets was discarded on 9-30-13. All other containers of leftover food stored at ELCE were found to be labeled and dated as required.

Dietary staff was re-trained on the importance of storing, dating and labeling all leftover foods properly and in compliance with the regulatory process.

Plan to prevent a similar violation from occurring again:

- 1) The ELCE administrator will make random checks (daily or weekly with compliance) on storage of leftover foods to ensure compliance by dietary staff with storing, labeling and dating correctly. Compliance will be documented in the ELCE Quality Management reports.
- 2) The administrator/head cook will maintain an adequate supply of containers and supplies needed to store, label and date left-over food products.
- 3) Any new dietary staff persons hired will have complete training including sanitation and proper storage of foods.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page)	Connie D. Lilliock, PCHA
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
Connie D. Lilliock, PCHA	12-3-13

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(Date)

Plan of correction implementation status as of 12/4/13  
(Date)

The above plan of correction was approved by [Signature]  
(Initials)

- Fully Implemented 2
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 44263 - 09/27/2013 - McConnell, Deb  
PCH Name: EASY LIVING COUNTRY ESTATES

DEC 3 2013

1. REGULATION 55 Pa.Code §2600

2600.103(i) - Outdated or spoiled food or dented cans may not be used.

WEST REGION FIELD OFFICE  
Human Services Licensing

2a. DESCRIPTION OF VIOLATION

On 9/27/13, there was an undated package of approximately 10-12 pancakes in the side by side freezer near the food storage area. There were ice particles in this package.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Page 6

Correction Plan for violation 2600.103 (i)

The undated package of pancakes in the freezer was discarded on 9-27-13. The contents of both freezers and the three refrigerators in the ELCE kitchen were checked by the administrator and verified that all other foods were appropriately stored and dated.

Dietary staff re-training included the regulatory requirement and "good-practice" to date and label all stored frozen foods (both unopened and leftover food products).

Plan to prevent a similar violation from occurring again:

- 1) The ELCE administrator will make random checks (daily or weekly with staff compliance) of frozen food products to ensure proper storage, dating and labeling. Compliance will be documented in the ELCE Quality Management Report.
- 2) The administrator/head cook will maintain an adequate supply of containers and supplies needed to store, label and date all frozen food products.
- 3) Any new dietary staff persons hired will have complete training including the proper storage of frozen food products.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative (Required on EVERY Page) *Connie D. Lilliock, PCHA*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Connie D. Lilliock, PCHA* Date *12-3-13*

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Plan of correction implementation status as of 12/4/13 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 44263 - 09/27/2013 - McConnell, Deb  
PCH Name: EASY LIVING COUNTRY ESTATES

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa. Code §2600  
2600.123(b) - Copies of the emergency procedures as specified in § 2600.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.

2a. DESCRIPTION OF VIOLATION  
On 9/27/13, the emergency procedures for the municipality were not posted in a conspicuous and public place in the home.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)  
Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Correction Plan for violation 2600.123 (b)

The copy of the emergency procedures for the municipality was posted in the ELCE office area. Additional copies were posted on 9-27-13 on the first floor outside the ELCE office and on the second and third floor resident areas.

Plan to prevent a similar violation from occurring again:

- 1) The Easy Living Country Estates administrator will monitor posting sites on all three floors weekly to verify the municipality emergency procedures are present in those conspicuous and public places at ELCE.
- 2) Posted copies of the municipality emergency procedures will be updated as appropriate.
- 3) Compliance with posting of the municipality emergency procedures in a conspicuous and public place will be documented in the Quality Management Report.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page)  
*Connie D. Lillock, PCHA*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)  
*Connie D. Lillock, PCHA* Date *12-3-13*

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The above plan of correction was approved by <u>[Signature]</u> (Initials)	
<input checked="" type="checkbox"/> Fully Implemented <i>[Signature]</i> <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented	

Violation Report: 44263 - 09/27/2013 - McConnell, Deb  
PCH Name: EASY LIVING COUNTRY ESTATES

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.184(a) - The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

- (1) The resident's name.
- (2) The name of the medication.
- (3) The date the prescription was issued.
- (4) The prescribed dosage and instructions for administration.
- (5) The name and title of the prescriber.

2a. DESCRIPTION OF VIOLATION

The September 2013 medication administration record for resident #2<sup>3</sup> includes the following sliding scale order of Novolin insulin:

- \* 151-180 = 2 units
- \* 181-200 = 4 units
- \* 201-250 = 6 units
- \* 251-300 = 8 unit
- \* 301-350 = 10 units
- \* 351-445 = 12 units
- \* > 445, contact physician

However, the label on the container of Novolin belonging to resident #2<sup>3</sup> includes the following sliding scale order:

- \* 150-180 = 2 units
- \* 181-250 = 4 units
- \* 251-300 = 6 units
- \* 301-350 = 8 units
- \* 351-400 = 10 units

(Observed 9/30/13)

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

*(Please see page 8 addendum)*

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative (Required on EVERY Page) *Connie D. Lilliock, PCHA*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Connie D. Lilliock, PCHA* Date *12-3-13*

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Plan of correction implementation status as of 12/4/13 (Date)

The above plan of correction was approved by *[Signature]* (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Correction Plan for violation 2600.184 (a) (The MAR in question was resident #3, not resident #2).

An orange label "direction changed, refer to med sheet" was immediately applied 9-30-13 to resident #3 Novolin bottle to designate the difference between the medication administration record of resident #3 and the label on resident # 3 Novolin bottle.

ELCE resident care coordinator, [REDACTED] notified Diamond Pharmacy of the discrepancy in the dosage and instructions on resident # 3 Novolin Insulin bottle label with the medication administration record for September 2013. Diamond pharmacy dispensed a new bottle of Novolin Insulin with the correct label instructions and dosages on 9-30-13 (Insulin is replaced every month routinely, therefore the new bottle issued was for October 2013).

Plan to prevent a similar violation from occurring again:

- 1) All medication aides at ELCE were retrained on the importance of comparing the MAR instructions and the label instructions to verify the exact information on both regarding the resident's name; the name of the medication; the date the prescription was issued; the prescribed dosage and instructions for administration; and the name and title of the prescriber prior to administration of any medication.
- 2) The administrator and resident care coordinator will continue to monitor and verify the MAR and medication labels with the delivery of each month's new medication cycle and immediately report and request any corrections needed from Diamond Pharmacy.

Violation Report 44263 - 09/27/13  
Easy Living Country Estates  
Correction Plan for violation 2600.184 (a)

Connie D. Lilliock, PCHA 12-3-13  
Connie D. Lilliock, PCHA

*JW*  
12/4/13

Violation Report: 44263 - 09/27/2013 - McConnell, Deb  
PCH Name: EASY LIVING COUNTRY ESTATES

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa. Code §2600

2600.224(a) - A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

2a. DESCRIPTION OF VIOLATION

The preadmission screening, dated 10/26/12, for resident #3 does not include the determination that the home can meet the service needs of the resident.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Correction Plan for violation 2600.224(a) (The preadmission screening in question is res. #2, not res. #3).

The preadmission screening for resident #2 did not have the box checked indicating the determination that the home (ELCE) could meet the service needs of the resident. [Redacted] PCHA @ ELCE completed the original version of the preadmission screening and made the oversight in documentation. The administrator [Redacted] corrected the oversight (9-27-13) on the preadmission screening and designated ELCE able to meet the service needs of resident # 2 at the time of her admission (10-26-12).

Plan to prevent a similar violation from occurring again:

- 1) The personal care home administrator or designee completing the preadmission screening for each new admission will recheck and review each screening (in particular that the designation that ELCE can meet the service needs of that prospective resident) for completion prior to placing it in the resident's record.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Connie D. Lilliock, PCHA*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Connie D. Lilliock, PCHA* Date *12-3-13*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 12/4/13  
(Date)

Plan of correction implementation status as of 12/4/13  
(Date)

The above plan of correction was approved by [Signature]  
(Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented