



Mailing Date: September 7, 2018

Ms. Catherine Rowe,
Owner
Hillside Rest Home, Inc.
P.O. Box 552
Blue Ridge Summit, Pennsylvania 17214

RE: Hillside Personal Care
1175 Old Waynesboro Pike
Fairfield, Pennsylvania 17320
Certificate #: 348750

Dear Ms. Rowe:

As a result of the Department's Bureau of Human Services Licensing inspection on May 22, 2018 and July 27, 2018 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.

Sincerely,

A handwritten signature in black ink that reads "Brett Swanger". The signature is written in a cursive style with a large, looped "S" at the end.

Brett Swanger
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report: 34875 - 05/22/2018 - Showers, Michael
 PCH Name: HILLSIDE PERSONAL CARE

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

2a. DESCRIPTION OF VIOLATION

On 05/22/2018 at 12:45 pm, a representative from the Department identified the following unsanitary conditions:

There was a pungent odor of urine in upstairs bathroom number 3, and a puddle of urine on the floor. The shower curtain in this bathroom was dirty with brown stains and the representative observed dried feces on the back of the toilet seat.

Bedroom number 9, shared by several residents of the home, had a pungent odor of urine emanating throughout the room.

The licensing representative observed dried feces on the toilet seat in the two stall downstairs bathroom.

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.

Immediately – Bathroom #3 was cleaned and sanitized, bedroom #9 was cleaned and sanitized, the toilet seat downstairs was cleaned and sanitized.

On-going – Staff were re-educated on regulation 2600.85(a) and explained the reason and importance of the regulation. Supervisor staff will provide on-going education and supervision.

The administrator will complete a review of all areas of the home during daily walk-throughs of the facility. Any identified problems related to the sanitary conditions at the facility shall be immediately rectified.

BAS 7/12/18

Repeat Violation: Yes	Date(s) of Previous Violation(s):	12/07/2017
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Cheryl Morgan*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Cheryl Morgan, Asst Admin* Date *7/5/18*

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

The above plan of correction is approved as of 7/12/18
 (Date)

The above plan of correction was approved by *BAS*
 (Initials)

Plan of correction Implementation status as of 9/7/18
 (Date)

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

Violation Report: 34875 - 05/22/2018 - Showers, Michael

PCH Name: HILLSIDE PERSONAL CARE

1. REGULATION 55 Pa.Code §2600

2600.88(a) - Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

On 5/22/18, a licensing representative of the Department observed the following:

The steps leading to upstairs, used by residents, had a heavy accumulation of dirt and debris on the carpet.

The bathtub in the upstairs bathroom number 4 contained an accumulation of soap scum, and the shower curtain in this bathroom was dirty with brown stains.

Bedroom number 9 had an accumulation of dirt and debris on the carpeting.

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.

Immediately – The stairs were cleaned, bedroom #9 was cleaned and sanitized, the bathtub was cleaned and sanitized, the shower curtain was cleaned and sanitized.

On-going – Staff were re-educated on regulation 2600.88(a) and explained the reason and importance of the regulation. Supervisor staff will provide on-going education and supervision

The administrator will complete a review of all areas of the home during daily walk-throughs of the facility. Any identified problems related to the cleanliness of areas at the facility shall be immediately rectified.

BAS 7/12/18

Repeat Violation: Yes	Date(s) of Previous Violation(s):	12/07/2017		
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Signature of Legal Entity Representative
(Required on EVERY Page) *Cheryl Morgan*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Cheryl Morgan Asst. Admin* Date *7/5/18*

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Violation Report: 34875 - 07/24/2018 - Heemer, Laura

PCH Name: HILLSIDE PERSONAL CARE

1. REGULATION 55 Pa.Code §2600

2600.42(l) - A resident has the right to furnish his room and purchase, receive, use and retain personal clothing and possessions.

2a. DESCRIPTION OF VIOLATION

Food belonging to individual residents is required to be locked in a snack cabinet according to the Home's Rules. This cabinet is locked with only staff having access to the key. Residents are not allowed to have access to their personal food items at any time other than the scheduled 2:30 pm snack time.

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.

Immediately- Staff was educated on the regulation 2600.42(l) and educated that a resident who requests his/her belongings, that are in the care of the home, shall immediately be provided with those belongings. Residents were provided education that they will have immediate access to their belongings upon request to the home staff.

All staff will be receive re-education on all resident rights as stated in regulation 2600.42 and will receive re-education in the home's policies regarding sanitary food storage by and for teh residents. This re-education will be completed within one month from the date of this plan.

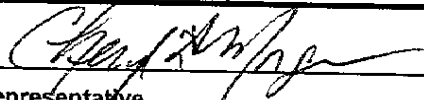
On-going- The administrator shall monitor staff compliance with resident rights and residents' immediate access to belongings.

Each RASP (initial, annual, or update) shall assess the resident's ability to comply with proper food storage as related to sanitary conditions of the home.

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)

Cheryl Morgan Asst Admin

Date 8/25/18

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Violation Report: 34875 - 07/24/2018 - Heemer, Laura

PCH Name: HILLSIDE PERSONAL CARE

1. REGULATION 55 Pa.Code §2600

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.

2a. DESCRIPTION OF VIOLATION

There is a bathroom located on the first floor of the home containing two toilet stalls. The toilet stall located farthest from the sink has two non-functioning latches and the stall door is unable to be secured by a user. On 7/25/18, a licensing representative walking in the hallway outside of the entrance to the bathroom observed a resident using this toilet.

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.

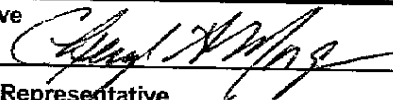
On 7/26/18 – Locks were repaired

On-going – Building manager will inspect locks weekly and schedule/or repair as identified. Staff will be educated to alert building manager as to any needed lock repair.

Repeat Violation: No

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Cheryl Morgan

Date 8/25/18

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Violation Report: 34875 - 07/24/2018 - Heemer, Laura
 PCH Name: HILLSIDE PERSONAL CARE

1. REGULATION 55 Pa.Code §2600

2600.88(a) - Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

The main stairway to the second floor has a stained carpet with areas where the fibers have been worn away exposing the underlayer. Debris is embedded in the worn away areas.

The tub in bathroom # 4 had an approximate eight inch ring of dirt around the interior. The tile surround of the tub has tiles that are coming loose and stick out. The floor around the base of the toilet and the pedestal sink in this bathroom was wet with water.

There was water around the base of the toilet and the pedestal sink in Bathroom # 3 that was puddling on the floor. There were three rectangular tiles missing from the wall in the shower.

The floor in bathroom # 1 was wet due to water around the bases of the toilet and pedestal sink.

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.

08/08/18 – All carpets were professionally cleaned. Stairs were deep cleaned and in good condition.

Immediately –The tub in bathroom #4 was cleaned. Water was cleaned up.

By 9/4/18 – Loose tiles will be repaired.

Immediately The water in bathroom #3 was cleaned up.

By 9/4/18 – Missing tiles will be repaired.

Immediately – The water in bathroom #1 was cleaned up.

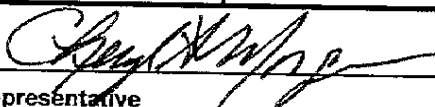
On-going - Building manager will inspect weekly surfaces for hazards and schedule/or repair/clean as identified. Staff will be required to report all immediate needs of repair

Repeat Violation: Yes

Date(s) of Previous Violation(s):

12/07/2017

Signature of Legal Entity Representative
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Printed Name and Title of Legal Entity Representative
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Cheryl Morgan, Asst Admin

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Violation Report: 34875 - 07/24/2018 - Heemer, Laura

PCH Name: HILLSIDE PERSONAL CARE

1. REGULATION 55 Pa.Code §2600

2600.102(c) - There shall be at least one bathtub or shower for every ten or fewer users, including residents, staff persons and household members.

2a. DESCRIPTION OF VIOLATION

On 7/25/18, the home served 45 Residents. On that date there were four functioning bathing facilities in the home. The shower head was missing and wooden molding was being stored in the tub/shower in bathroom #1 and thus unable for use by the residents.

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.

Immediately – The molding was removed from the bathtub.

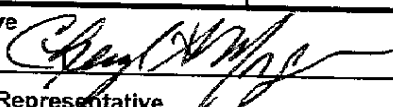
On 7/26/18 – A new shower head was replaced on shower.

On-going - Building manager will inspect weekly for compliance of regulation of 2600.102(c) and schedule repairs as needed. Staff will be required to report all immediate needs of repair.

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Violation Report: 34875 - 07/24/2018 - Heemer, Laura

PCH Name: HILLSIDE PERSONAL CARE

1. REGULATION 55 Pa.Code §2600

2600.121(a) - Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

2a. DESCRIPTION OF VIOLATION

On 7/25/18 at 9:15 am, an accordion door and four pieces of molding blocked the egress from Exit door# 4, located at the street side of the home. This door was also stuck and required several full body shoves by the Licensing Representative in order for it to open.

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

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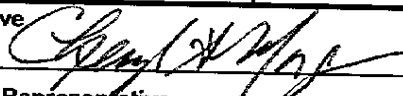
On 7/25/18 – The molding and accordion door were removed from the area of Exit door #4. The door is scheduled to be sanded by 8/27/18 and painted as permitted by weather.

On-going – Building manager will inspect weekly for compliance of regulation 2600.12(a) and schedule repairs as needed. Staff will be required to report all immediate needs of repair.

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