

Department of Human Services
Bureau of Human Service Licensing

May 3, 2021

JAMES STAMBAUGH, OWNER
HILLSIDE ESTATES SUITES INC
177 OLIVER ROAD
UNIONTOWN, PA 15401

RE: HILLSIDE ESTATES SUITES
1526 INDEPENDENCE AVENUE
CONNELLSVILLE, PA, 15425
LICENSE/COC#: 44704

Dear Mr. STAMBAUGH,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/20/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Larry Mazza

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: *HILLSIDE ESTATES SUITES* License #: *44704* License Expiration Date: *02/01/2021*
 Address: *1526 INDEPENDENCE AVENUE, CONNELLSVILLE, PA 15425*
 County: *FAYETTE* Region: *WESTERN*

Administrator

Name: *JAMES STAMBAUGH* Phone: *7243664239* Email: *HILLSIDEMANORPCH@GMAIL.COM*

Legal Entity

Name: *HILLSIDE ESTATES SUITES INC*
 Address: *177 OLIVER ROAD, UNIONTOWN, PA, 15401*
 Phone: *7243664239* Email: *HILLSIDEMANORPCH@GMAIL.COM*

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *11/07/1995* Issued By: *Labor and Industry*

Staffing Hours

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

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint* Exit Conference Date: *11/30/2020*

Inspection Dates and Department Representative

10/20/2020 - On-Site: Ashley Roser

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *20* Residents Served: *13*

Secured Dementia Care Unit

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

Hospice

Current Residents: *2*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *13*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *3* Have Physical Disability: *0*

Inspections / Reviews

10/20/2020 - Partial

Lead Inspector: *Ashley Roser* Follow-Up Type: *POC Submission* Follow-Up Date: *12/25/2020*

Inspections / Reviews *(continued)*

1/6/2021 - POC Submission

Lead Reviewer: *Larry Mazza*Follow-Up Type: *POC Submission*Follow-Up Date: *01/12/2021*

1/13/2021 - POC Submission

Lead Reviewer: *Larry Mazza*Follow-Up Type: *Document Submission*Follow-Up Date: *01/19/2021*

5/3/2021 - Document Submission

Lead Reviewer: *Larry Mazza*Follow-Up Type: *Not Required*

16c - Written Incident Report

1. Requirements

2600.

- 16.c. The home shall report the incident or condition to the Department’s personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On 10/16/20, the Pennsylvania State Police responded to the home due to a dispute between staff persons B and D; however, this incident was not reported to the Department until 10/20/20.

Plan of Correction

Accept

The incident was at the edge of the facility parking lot and Independence Ave. The dispute was between 2 staff persons who are also related. The situation was a domestic issue and did not involve residents and/or the personal care facility. The police diffused the situation and left. A police report and/or charges were not filed. If the police are on the premises for ANY REASON, all staff have been instructed verbally and in writing (see attached) that the administrator or designated person MUST be notified immediately. The administrator or designated person will complete a incident report and forward to the Dept of Human Services within 24 hours.

Completion Date: 01/16/2021

Document Submission

Implemented

SEE ATTACHED

183d - Prescription Current

1. Requirements

2600.

- 183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

Resident #1 is prescribed Lorazepam 0.5 mg-Take 1 syringe orally every 2 hours as needed for anxiety; however, the syringes present in the home expired on 9/30/20.

Plan of Correction

Accept

The expired medication was disposed of on 10/20/20. The hospice agency has been asked to check all hospice covered medications with every nursing visit. All medications were checked for expiration on 12/26/20. A medication audit will be conducted monthly by a designated staff person and documentation will be kept - see attached.

Completion Date: 12/26/2020

Document Submission

Implemented

SEE ATTACHED

185a - Implement Storage Procedures

1. Requirements

2600.

- 185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

185a - Implement Storage Procedures (continued)

Description of Violation

According to the home's electronic narcotic log, staff person B and staff person C signed off as disposing of numerous doses of narcotics on numerous dates, to include resident #3's Clonazepam-0.5mg tablets on 10/8/20, resident #4's Lorazepam-0.5mg tablets and Lorazepam-2 mg/ml vials on 10/16/20, and resident #5's Hydrocodone APAP-5/325mg tablets on 8/15/20 and on 9/18/20 and resident #5's Alprazolam-0.5mg tablets on 9/18/20. However, staff person C used staff person B's login credentials to document that staff person B was also present at the time the medications were disposed of, despite that staff person B was not present at that time the medications were disposed.

The home's Narcotics and Controlled Substances policy indicates "all narcotics and controlled substances are to be counted and accounted for by the shift coordinator at the start and end of each shift and confirmed by both the out going and incoming shift coordinator"; however, on 10/20/20, only staff person A counted the home's narcotic count at the start of the morning shift.

Plan of Correction

Directed

The policy and procedure for the narcotic count was updated - see attached. All staff will receive a copy of the revised policy and procedure for controlled substances. A signed copy will be kept in employee file. A med pass with a narcotic count will be observed for all staff by 1/19/21 by a DEPARTMENT OF HUMAN SERVICES CERTIFIED MEDICATION ADMINISTRATION TRAINER. All staff whom administer medications will be re-educated (in person) on the proper procedure for medication administration including narcotic count and documentation will be kept in employee file. All staff will be re-educated by 1/19/21. After all staff have completed an observed med pass and narcotic count by a DEPARTMENT OF HUMAN SERVICES CERTIFIED MEDICATION ADMINISTRATION TRAINER, a staff person will be designated to witness a med pass with a narcotic count 3 times per week x 3 months (documentation will be kept). See attached.

By 1/19/21: All staff persons shall be educated that under no circumstances should employee's login credentials for the electronic MAR system be provided to or used by any other employee. Documentation of the education shall be kept. LM 1/13/21

Immediately upon receipt of the plan of correction: A designated staff person shall review documentation for all narcotic administration daily for one week, then weekly thereafter to ensure narcotics are administered, counted and disposed of in accordance with the home's policies and procedures. Documentation of the audits shall be kept. LM 1/13/21

Completion Date: 01/19/2021

Document Submission

Implemented

SEE ATTACHED

185b - Medication Procedures

1. Requirements

2600.

185.b. At a minimum, the procedures must include:

1. Documentation of the receipt of controlled substances and prescription medications.
2. A process to investigate and account for missing medications and medication errors.
3. Limited access to medication storage areas.

185b - Medication Procedures (continued)

4. Documentation of the administration of prescription medications, OTC medications and CAM for residents who receive medication administration services or assistance with self-administration. This requirement does not apply to a resident who self-administers medication without the assistance of a staff person and stores the medication in his room.

Description of Violation

The home's Narcotics and Controlled Substances policy does not include a process to investigate and account for missing medications or medication errors.

On 5/15/20, staff person C issued a memo to staff persons which states, ".....when you sign the medication off in the computer you MUST physically check the number of doses left. When you are signing off the med in the computer and it asks you to verify how many doses are left, if the number of pills left in the card does not match what the computer is telling you, I must be called IMMEDIATELY (even in the middle of the night)". From 7/1/20 through 10/1/20, approximately 140 doses of narcotics were adjusted on the home's electronic narcotic log by staff person C, to include 11 doses of resident #6's Hydrocodone APAP-5/325mg from 9/6/20 through 10/19/20. According to staff interviews, once staff members notify staff person C the narcotic counts are off, staff person C adjusts the narcotic logs remotely, and is not present in the home the majority of the time the narcotics need adjusted.

185b - Medication Procedures (continued)

Plan of Correction

Directed

Policies and Procedures for controlled substances (1/12/21)

- 1. All medications MUST be administered and documented at the time of administration. If a pill is dropped, refused, etc. the pill must be disposed of in the drug buster. The electronic narcotic count must be completed in Quickmar when the medication disposal is completed. IF there is not another staff member present that has access to Quickmar, a paper count must be documented, signed by both staff, and filed in the binder labeled "CONTROLLED SUBSTANCE ADJUSTMENTS". If a medication disposal is witnessed on paper, the narcotic count in the computer will be adjusted by the shift coordinator who disposed of the medication and the administrator/designated person within 24 hours of a paper medication disposal and a note will be added to the adjustment to refer to paper controlled substance adjustment.*
- 2. All narcotics must be counted and documented at the beginning and end of every shift. The staff member starting their shift is the person who counts the pills and the staff person leaving their shift enters the count into the computer. Only the person designated to pass medications on a shift will have access to medications. If there is not another staff person with Quickmar access present at the beginning or end of any shift, a paper narcotic count must be completed and witnessed by another staff person. If a paper narcotic count is completed, the paper will be filed in the CONTROLLED SUBSTANCE BINDER.*
- 3. If a narcotic count does not reconcile at any time, the shift coordinator starting and ending the shift is not permitted to leave the facility until administrator or DESIGNATED person is called and they have been given permission to leave.*
- 4. If any suspicious activity is suspected, the shift coordinator will be removed from the position immediately until an internal investigation is completed. Return to shift coordinator position will depend on the outcome of the investigation. If medication is not accounted for or criminal activity is suspected, the police will be notified and charges will be pursued. The process for investigating a controlled substance discrepancy will be collaborative among Hillside Estates Suites PCH, designated pharmacy, and prescribing medical provider. If a problem is identified, an incident report will be completed and submitted to the Dept of Human Services within 24 hours.*
- 5. As per the Employee Handbook, all staff are subject to random drug testing.*

A med pass with a narcotic count will be observed for all staff by 1/19/21 by a DEPARTMENT OF HUMAN SERVICES CERTIFIED MEDICATION ADMINISTRATION TRAINER. All staff whom administer medications will be re-educated (in person) on the proper procedure for medication administration including narcotic count and documentation will be kept in employee file. All staff will be re-educated by 1/19/21. After all staff have completed an observed med pass and narcotic count by a DEPARTMENT OF HUMAN SERVICES CERTIFIED MEDICATION ADMINISTRATION TRAINER, a staff person will be designated to witness a med pass with a narcotic count 3 times per week x 3 months (documentation will be kept). See attached.

By 1/19/21: All staff persons shall be educated that under no circumstances should employee's login credentials for the electronic MAR system be provided to or used by any other employee. Documentation of the education shall be kept. LM 1/13/21

Immediately upon receipt of the plan of correction: A designated staff person shall review documentation for all narcotic administration daily for one week, then weekly thereafter to ensure narcotics are administered, counted and disposed of in accordance with the home's policies and procedures. Documentation of the audits shall be kept. LM 1/13/21

185b - Medication Procedures *(continued)*

Document Submission

Implemented

SEE ATTACHED

187b - Date/Time of Medication Admin.

1. 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

On 10/20/20 at 8:00am, staff person A signed resident #2's October 2020 medication administration record as administering the resident's Hydrocodone-APAP 10/325mg; however, this medication was not administered until 11:10am on 10/20/20.

Plan of Correction

Directed

Staff person A is no longer employed.

A med pass with a narcotic count will be observed for all staff by 1/19/21 by a DEPARTMENT OF HUMAN SERVICES CERTIFIED MEDICATION ADMINISTRATION TRAINER. All staff whom administer medications will be re-educated (in person) on the proper procedure for medication administration including narcotic count and documentation will be kept in employee file. All staff will be re-educated by 1/19/21. After all staff have completed an observed med pass and narcotic count by a DEPARTMENT OF HUMAN SERVICES CERTIFIED MEDICATION ADMINISTRATION TRAINER, a staff person will be designated to witness a med pass with a narcotic count 3 times per week x 3 months (documentation will be kept). See attached. (DIRECTED: The staff person who is designated to observe the medication administrations shall ensure medications are initialed as administered on resident MAR's immediately following medication administration. Documentation of the audits shall be kept. LM 1/13/21)

Completion Date: 01/19/2021

Document Submission

Implemented

SEE ATTACHED