

Department of Human Services
Bureau of Human Service Licensing

April 28, 2021

[REDACTED] PRESIDENT
HILLSIDE ESTATES SUITES INC
177 OLIVER ROAD
UNIONTOWN, PA 15401

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

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 03/30/2021 of the above facility, the citations specified on the enclosed Licensing Inspection Summary (LIS) were found.

We have determined that your plan of correction is: Acceptable

All citations specified on the plan of correction must be corrected by the dates specified on the License Inspection Summary (violation report) and continued compliance with Department statutes and regulations 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 **Licen e #:** 44704 **Licen e Expiration Date:** 02/01/2022
Addr e : 1526 INDEPENDENCE AVENUE, CONNELLSVILLE, PA 15425
County: FAYETTE **Region:** WESTERN

Administrator

Name: [REDACTED] **Phone:** 7243664239 **Email:** [REDACTED]

Legal Entity

Name: HILLSIDE ESTATES SUITES INC
Address: 177 OLIVER ROAD, UNIONTOWN, PA, 15401
Phone: 7246284060 **Email:** [REDACTED]

Certificate(s) of Occupancy

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

Staffing Hours

Re ident Support Staff: 0 **Total Daily Staff:** 13 **Waking Staff:** 10

Inspection

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Monitoring **Exit Conference Date:** 03/30/2021

Inspection Dates and Department Representative

03/30/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 20 **Residents Served:** 11

Secured Dementia Care Unit

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

Hospice

Current Residents: 6

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 11
Diagnosed with Mental Illness: 1 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 2 **Have Physical Disability:** 0

Inspections / Reviews

03/30/2021 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 04/24/2021

Inspections / Reviews *(continued)*

4/27/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow Up Type: *POC Submission*Follow-Up Date: *04/29/2021*

4/28/2021 POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *05/05/2021*

121a - Unobstructed Egress

1. Requirements

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

At 9:13 a.m., the exit door next to the fire panel was locked and unable to be opened.

Plan of Correction

Directed

Licensing Violation 121.a.

At 9:13 a.m., the exit door next to the fire panel was locked and unable to be opened.

How did it happen?

There are 2 sets of doors within 6 feet of each other can be used for emergency evacuation from the building (see attached picture). One of the handles on one of the doors broke on 3/28/21. The replacement door handle had to be ordered and the door would not stay closed so it was temporarily locked but the other door was unlocked and functioning. The door was also posted to please use other door.

What do we do right now to fix the problem?

Who Administrator

What Removed door handle from administrator's home and replaced handle on door

When Approximately 2pm on day of inspection (see attached documentation)

How do we prevent this from happening again?

Administrator will purchase additional door handle to keep in stock.

The emergency door was locked with a deadbolt lock mechanism above the handle that was broken. The door handle does not have a lock. The deadbolt mechanism will be removed from the emergency exit door on 4/28/21; therefore, it will not be possible to lock the door because it will not have a lock - documentation will be provided once mechanism is removed. All of the other emergency exit doors in the building do not have a locking mechanism that can prevent emergency exit of the building in the event of an emergency.

DIRECTED: Within 24 hours of receipt of the plan of correction: A designated staff person shall inspect the home daily to ensure all stairways, hallways, doorways, passageways and egress routes from rooms and from the building are unlocked and unobstructed. LM 4/28/21

Completion Date: 04/28/2021

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.

183d - Prescription Current *(continued)***Description of Violation**

Resident #1 was prescribed Erythromycin Eye Ointment-Apply ½ ribbon in both eyes twice daily for 7 days. This medication was discontinued on 3/18/21; however, was still present in the home's medication cart.

183d - Prescription Current (*continued*)**Plan of Correction****Directed**

Licensing Violation 183.d.

Resident #1 was prescribed Erythromycin Eye Ointment Apply ½ ribbon in both eyes twice daily for 7 days. This medication was discontinued on 3/18/21; however, was still present in the home's medication cart.

Why did it happen?

A medication audit is currently being conducted monthly (see attached documentation). The last medication audit was on 3/14/2021 so the Erythromycin Eye Ointment was still an active order at the time of the last medication audit.

What do we do right now to fix the problem?

Who Home supervisor

What Removed Erythromycin Eye Ointment from the medication cart and placed it in the container to return to the pharmacy.

When During inspection on 3/30/2021

How do we prevent this from happening again?

Who Home supervisor/Designated staff person

What Will continue to conduct monthly medication audits (see attached documentation) and will keep documentation checklist of time limited medication such as ear drops, eye drops, eye ointment, etc. to ensure time limited discontinued medications are removed from medication cart (see attached documentation).

When Will keep documentation checklist of time limited medication as prescribed and will continue monthly medication audit.

Timeline/Work Plan

See attached documentation.

When a time limited medication (eye drops, eye ointment, ear drops, topical cream, etc.) is prescribed It will be packaged and labeled in a "high alert" bag to indicate it is a time limited medication. Spoke with medication tech at pharmacy to ensure time limited meds are delivered in "high alert" bag (see attached documentation). When a time limited medication is prescribed, it MUST be removed from the medication cart as soon as the last dose is administered. When a new medication order is received for a time limited medication, it must be written on the time limited medication log (see attached so it can be tracked and removed from the medication cart as soon as the last dose is administered. Designated staff person will be responsible for following up to ensure time limited medications are removed after last dose is administered. All staff administering medication will be educated on the plan of correction (see attached). DIRECTED: By 5/5/21: The staff education on the new process shall be completed: Documentation of the education shall be kept. LM 4/28/21

Completion Date 05/01/2021

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

Violation Withdrawn [REDACTED] 4/28/21

[REDACTED]

[REDACTED]

Violation Withdrawn 4/28/21

[REDACTED]

[REDACTED]

