

Department of Human Services
Bureau of Human Service Licensing

November 9, 2021

 MANAGER/PRESIDENT

RE: GREY'S COLONIAL ACRES
272 COLONIAL ROAD
KITTANNING, PA, 16201
LICENSE/COC#: 44640

Dear Mr. Grey, Jr.,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/21/2021, 09/22/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,


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: *GREY'S COLONIAL ACRES* License #: *44640* License Expiration Date: *01/16/2022*
Address: *272 COLONIAL ROAD, KITTANNING, PA 16201*
County: *ARMSTRONG* Region: *WESTERN*

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

[REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *02/26/1996* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *33* Waking Staff: *25*

Inspection

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *09/22/2021*

Inspection Dates and Department Representative

09/21/2021 - On-Site: [REDACTED]
09/22/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *38* Residents Served: *28*

Secured Dementia Care Unit

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

Hospice

Current Residents: *1*

Number of Residents Who:

Receive Supplemental Security Income: *2* Are 60 Years of Age or Older: *28*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *5* Have Physical Disability: *1*

Inspections / Reviews

09/21/2021 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/30/2021*

11/3/2021 - POC Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *11/10/2021*

11/9/2021 - Document Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Not Required*

3c - Post Current License

1. Requirements

2600.

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

Description of Violation

On 9/21/2021, the home's licensing issuance summary (LIS), dated 11/26/2019, was not posted in a conspicuous and public place in the home.

Plan of Correction

Accept

Posted Copy of LIS dated 11/26/19, on 9/21/21. Administrator will post current LIS dated 9/21/21-9/22/21. Administrator will check hallway posting monthly for 6 months then Quarterly thru 2022 to ensure correct LIS is posted. Automatic reminder was added to Administrator calendar.

Completion Date: 10/29/2021

Document Submission

Implemented

Posted LIS, added reminder

81b - Resident Personal Equipment

1. Requirements

2600.

- 81.b. Wheelchairs, walkers, prosthetic devices and other apparatus used by residents must be clean, in good repair and free of hazards.

Description of Repeat Violation

Resident #1 has an enabler bar attached to his/her bed; however, there is an approximate 4 inch by 3 inch opening, posing an entrapment hazard.

Repeat Violation: 11/26/2019

Plan of Correction

Accept

Removed enabler 10/25/21, notified Hospice agency to pickup their enabler because it posed an entrapment hazard and that only cane style enablers could be used. Hospice nurse reevaluated resident and decided an enabler was no longer needed. Administrator checked all rooms to ensure proper enablers were being used. A notice was posted for employees to report any equipment brought in for residents, so Administrator to check, prior to use, for compliance with Regulation 2600.81.b. Administrator will check the PCH monthly to ensure compliance. An automatic reminder was added to Administrators calendar.

Completion Date: 10/25/2021

Document Submission

Implemented

removed enabler, added reminder

82a - Poisonous Materials

1. Requirements

2600.

- 82.a. Poisonous materials shall be stored in their original, labeled containers.

82a - Poisonous Materials (continued)**Description of Violation**

On 9/21/2021 there were multiple 32 ounce spray bottles in the cleaning closet with the following liquids that did not have the original labels:

Glass Cleaner

Friendly Acid Bathroom Cleaner

Odoban

Carpet Extraction / Spotter

Green Degreaser

Plan of Correction**Accept**

Placed original labels on Bottles 9/21/21. Posted notice for employees to only use bottles with factory labels for Poisonous materials. Administrator will check Quarterly to ensure poisonous materials are properly labeled. A reminder was added to the Administrators calendar.

Completion Date: 09/21/2021

Document Submission**Implemented**

Labeled bottles, posted notice, added reminder

88a - Surfaces**1. Requirements**

2600.

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

Description of Violation

On 9/21/2021, there was hole measuring approximately 5 inches by 4 inches in the bathroom door of resident room #208. There were sharp, jagged edges posing a skin tear hazard.

Plan of Correction**Accept**

Repaired door 9/21/21. Posted notice for employees to report any hazards to the Administrator so they could be corrected. Administrator will check quarterly throughout the PCH for any hazards that might of been missed by employees. a reminder was added to the Administrators calendar.

Completion Date: 10/29/2021

Document Submission**Implemented**

fixed door, posted notice, added reminder

101j7 - Lighting/Operable Lamp**1. Requirements**

2600.

101.j. Each resident shall have the following in the bedroom:

7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

The lamp mounted on the wall beside resident #1's bed was not operable. It did not have a pull chain or other means of turning on.

101j7 - Lighting/Operable Lamp *(continued)***Plan of Correction****Accept**

Placed portable lamp on resident #1's bedside table 9/21/21. Repaired pull chain 9/22/21. Administrator checked all bedside lighting 9/22/21. posted reminder to employees to notify Administrator of any lights in need of repair. Administrator will check bedside lighting quarterly to ensure residents have an operable light source. A reminder was added to Administrators calendar.

Completion Date: 09/22/2021

Document Submission**Implemented**

placed lamp, fixed chain, posted reminder, added reminder to calendar.

162c - Menus Posted

1. 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 home's menus for the current week of 9/19/2021 to 9/25/2021 and the advance week of 9/26/2021 to 10/2/2021 were not posted.

Plan of Correction**Accept**

All Menus are/were posted in Dining room. Dates were corrected on Menus 9/22/21. Administrator added dates to Menus thru July 2, 2023. A reminder was added to Administrators calendar to update dates on June 14, 2023 to ensure correct dates are on the Menus.

Completion Date: 10/26/2021

Document Submission**Implemented**

attached dates, added reminder