

Department of Human Services  
Bureau of Human Service Licensing

December 13, 2021

[REDACTED], EXECUTIVE DIRECTOR

RE: EASY LIVING COUNTRY ESTATES  
ONE EASY LIVING DRIVE  
HUNKER, PA, 15639  
LICENSE/COC#: 44263

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/30/2021, 10/01/2021 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**

**Facility Information**

Name: *EASY LIVING COUNTRY ESTATES* License #: *44263* License Expiration:  
Address: *ONE EASY LIVING DRIVE, HUNKER, PA 15639*  
County: *WESTMORELAND* Region: *WESTERN*

**Administrator**

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

**Legal Entity**

Name: *DS REALTY VENTURES LLC*  
Address: *ONE EASY LIVING DRIVE, HUNKER, PA, 15639*  
Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *I-2* Date: *01/12/2011* Issued By: *Hempfield TWP*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *38* Waking Staff: *29*

**Inspection Information**

Type: *Full* Notice: *Unannounced* BHA Docket #:  
Reason: *Renewal* Exit Conference Date: *10/01/2021*

**Inspection Dates and Department Representative**

09/30/2021 - On-Site: [REDACTED]

10/01/2021 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *60* Residents Served: *31*

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *1*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *31*  
Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *7* Have Physical Disability: *0*

**Inspections / Reviews**

**09/30/2021 - Full**

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *12/10/2021*

**Inspection Dates and Department Representative (*continued*)**

09/30/2021 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *12/15/2021*

09/30/2021 - Document Submission

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

20b6 - Interest Bearing Account

General Requirements

1. Requirements

2600.

20.b. If the home provides assistance with financial management or holds resident funds, the following requirements apply:

- 6. If a home is holding more than \$200 for a resident for more than 2 consecutive months, the administrator shall notify the resident and offer assistance in establishing an interest-bearing account in the resident's name at a local Federally-insured financial institution. This does not include security deposits.

Description of Violation

On [REDACTED], the home provides financial management of the trust funds for resident #1. From [REDACTED] to [REDACTED], the resident funds were \$200 or more. The current balance is \$260.00 However, there is no documentation the home has offered resident #1 assistance to establish an interest-bearing account.

Plan of Correction

Accept

On June 28, 2021, Resident #1, an alert and oriented ELCE resident, and Resident #1's son and POA jointly requested a deposit of \$400.00 cash into Resident #1's fund held by ELCE to provide ease and continuous availability of cash money as desired/needed by Resident #1 during the son's extended physical absence out of state. Resident #1 since admission to ELCE had managed her cash fund competently.

On October 1, 2021 at the department's inspector's inquiry, Resident #1 provided written documentation verifying no desire to deposit the remaining cash funds in excess of \$200.00 into an interest-bearing account at a local federally-insured financial institution.

ELCE used the department's standardized 'Record of Financial Transactions' form to provide requested financial assistance and documentation of all resident fund transactions. ELCE management revised the form to comply and simplify documentation of the 2600.20 b regulatory mandate.

ELCE revised version of the standardized form, now in use, provides written information to every resident who requests a fund deposit of the option to deposit their money in excess of \$200.00 into an interest-bearing account at a local federally-insured financial institution. The revision includes a signature verification of each resident's decision.

Completion Date: 10/01/2021

Document Submission

Implemented

See attachments

Completion Date: 12/13/2021

85a - Sanitary Conditions

Physical Site

1. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

On 9/30/21, at approximately 10:05a.m., the ceiling exhaust vent in the common bathroom by the conference room had

85.a. (continued) Sanitary conditions shall be maintained. approximately 1/4" layer of dirt/dust over the vent slats and between them.

On 9/30/21, at approximately 10:35 a.m., the ceiling light cover measuring approximately 30" long in the common shower/bathroom across from bedroom #305 has an estimated accumulation of 25 or more dead bugs inside.

On 9/30/21, at approximately 10:45 a.m., the ceiling light cover in the common shower/bathroom near bedroom #324 has an estimated accumulation of 30 or more dead bugs inside.

**Plan of Correction**

**Accept**

ELCE strives to maintain a sanitary, safe and pleasant environment for all our residents. Covid-19 regulations and necessary visitation restrictions in 2020-2021 had impacted the ability and timing of management's utilization of external housekeeping and maintenance contractors and the in-house delivery of their services for heavy-duty cleaning, especially those tasks requiring a ladder to reach the home's high ceiling areas. ELCE's daily housekeeping staff are not assigned those tasks as an employee-safety precaution. The ceiling exhaust vent in the lobby common bathroom by the conference room, the ceiling light cover in the common shower/bathroom across from bedroom #305 and the ceiling light cover in the common shower/bathroom near bedroom #324 were thoroughly cleaned the afternoon of 9-30-21.

Subsequently on 10-2-21, all the other exhaust vents and light covers in ELCE's eight common shower/bathrooms and the 60 resident bedroom bathrooms were checked by housekeeping and management staff for sanitary conditions and to verify no others had been overlooked. All others were found to be clean and sanitary. All ELCE employees, inclusive of housekeeping, kitchen staff, direct-care staff and management were in-serviced on maintaining sanitation throughout the facility and encouraged to immediately report any noted cleaning/sanitizing needs within the facility to the PCHA, RCC or the Executive Director. The housekeeping/maintenance notebook to document all such needs remains on the alcove counter just outside the first-floor management office. Logging such needs in that notebook by any employee on any shift was also reinforced. Management, housekeeping staff and ELCE's maintenance contractor (visits by scheduled appointments only in 2020-2021) routinely check the notebook for new entries that need completed.

The ELCE PCHA, RCC and the Executive Director will monitor, direct and assist if needed with housekeeping routines and job performance to ensure sanitation in all areas of the home. ELCE will continue to utilize outside housekeeping and maintenance contractors as needed to maintain a sanitary facility within the boundaries of any current Covid restrictions/regulations.

**Completion Date:** 10/02/2021

**Document Submission**

**Implemented**

See attachments

**Completion Date:** 12/13/2021

88a - Surfaces

Physical Site

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 9/30/21, there are several areas of the hallway across from the lounge and near the elevator, where the 18" by 18"

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

square rubber tile on the floor is bubbled and raised.

**Plan of Correction**

**Accept**

On Thursday, 9-30-21, caution floor signs were promptly positioned over the raised rubber tile areas in the right aisle of the first-floor hallway across from the lounge. The hallway is 8 feet wide, which allowed a safe and ample space for resident and staff traffic to the left of the caution signs.

A memo was issued to the ELCE staff by the PCHA and Executive Director with instructions to maintain the caution signs over the raised tile areas until repairs were completed. Direct-care staff escorted residents to and from the dining room 'as usual' for mealtimes. There were no disturbances or incidents with residents' hallway mobility thru the weekend with the implementation of the safety precautions.

The ELCE Executive Director contacted the facility's maintenance contractor (CTS) the afternoon of 9-30-21 and scheduled a service call for the tile repairs for early morning Monday, 10-4-21. CTS owner/general contractor, arrived at 8:00 AM Monday, 10-4-21. The affected tiles were removed and reinstalled using a bonding adhesive, eliminating all the raised areas of the tiles. The caution signs were removed and residents safely resumed normal traffic patterns in the hallway.

ELCE management (PCHA, RCC, and Executive Director) will monitor the lounge hallway and the other rubber tile flooring in the building during daily routines for any flaws in the tile. In the event of any future flaws in the rubber flooring, safety precautions and caution floor signs would be implemented promptly and a maintenance service call immediately scheduled for any needed repair(s).

Completion Date: 10/04/2021

**Document Submission**

**Implemented**

See attachments

Completion Date: 12/13/2021

91 - Telephone Numbers

Physical Site

1. Requirements

2600.

91. Emergency Telephone Numbers - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

**Description of Violation**

On 9/30/21, at approximately 10:20 a.m., none of the required emergency phone numbers were posted on or near the black telephone on the right wall in the boiler room.

On 10/1/21, at approximately 11:35 a.m., none of the required emergency phone numbers were posted on or near the black wall telephone in main lobby behind podium.

**Plan of Correction**

**Accept**

On 9-30-21, framed copies of the emergency telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management, American Red Cross, and the personal care home hotline were reposted near the black wall telephones in the boiler room and behind the main lobby podium.

Physical Site (continued)

Previously, ELCE management had framed copies of the emergency telephone numbers designated in regulation 2600.91 posted in close proximity of all facility phones with an outside line. Management makes periodic rounds to verify the presence and placement of the emergency telephone numbers' placards. Concentration on offices, stations and common areas resulted in the missing placards in the locked boiler room and behind the lobby podium to be overlooked. Outside vendors (contractors, Verizon, Comcast, Chestnut Hill, etc.) require entrance to the locked boiler room and may have inadvertently removed the posted placard during a service call. Residents and visitors have also been known to remove different postings, signs or décor from the building walls.

The PCHA will complete or assign routine monthly facility tours to verify the presence and placement of all emergency telephone numbers placards near phones with an outside line throughout the home. Replacement emergency telephone numbers placards are always available in the ELCE management office.

Completion Date: 10/01/2021

Document Submission

Implemented

See attachments

Completion Date: 12/13/2021

92 - Windows

Physical Site

1. Requirements

2600.

- 92. Windows and Screens - Windows, including windows in doors, must be in good repair and securely screened when doors or windows are open.

Description of Violation

On 9/30/21, the screen in the window in the 3rd floor (3 North) stairwell is in disrepair. The screen has a tear at the bottom measuring approximately 3½" by 1½".

Plan of Correction

Accept

The torn screen in the third floor (3 North) stairwell window was replaced on 10-4-21. The windows in ELCE stairwells are never routinely opened for any reason except for periodic cleaning services.

ELCE management (PCHA, RCC and, Executive Director) and housekeeping staff will monitor that all facility windows are securely screened and in good repair.

Completion Date: 10/04/2021

Document Submission

Implemented

See attachments

Completion Date: 12/13/2021

103f - Refrigerator/Freezer Temps

Physical Site

1. Requirements

## Physical Site (continued)

2600.

103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

**Description of Violation**

*On 9/30/21, the temperature of the stainless-steel double door refrigerator #1, measured 50 degrees Fahrenheit at approximately 11:30 a.m.*

**Plan of Correction****Accept**

*On Wednesday, 9-29-21, the ELCE kitchen staff person was completing all of the routine daily kitchen refrigerator/freezer temperature checks and discovered a variance of 1-2 degrees above 40 degrees F. with commercial refrigerator #1. The perishable food and beverage contents of refrigerator #1 were immediately transferred into the other two commercial kitchen refrigerators which had registered temperatures below 40 degrees.*

*The ELCE Executive Director and the PCHA on 9-29-21 notified "Changing Seasons", ELCE's heating and cooling contractor, and scheduled the earliest available service call for 6am on Friday 10-1-21. Refrigerator #1 was restored to normal functioning and the daily temperature readings on refrigerator #1 have remained at or below 40 degrees F. since 10-1-21.*

*Daily reading and recording of all kitchen and facility refrigerators and freezers' temperatures will be continued. Any future variances in refrigerator temperatures above 40 degrees would result in removal of the food contents to another refrigeration unit or discarded if necessary/indicated. The administrator or designee would notify "Changing Seasons" and a service call scheduled at the earliest available time.*

*Occasional function failures of appliances are unavoidable. The appropriate actions to safeguard food were taken 9-29-21 and remediate actions to repair refrigerator #1 were in progress on 9-30-21 at the time of ELCE's annual survey inspection. Therefore, it is reasonable to question why a violation was cited.*

**Completion Date:** 10/01/2021

**Document Submission****Implemented**

*See attachments*

**Completion Date:** 12/13/2021