


Department of Human Services
Bureau of Human Service Licensing

November 10, 2021

 PRESIDENT

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

Dear ,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/12/2021 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: *HILLSIDE ESTATES SUITES* License #: *44704* License Expiration Date: *02/01/2022*
Address: *1526 INDEPENDENCE AVENUE, CONNELLSVILLE, PA 15425*
County: *FAYETTE* Region: *WESTERN*

Administrator

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

Legal Entity

[REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *11/07/1995* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *13* Waking Staff: *10*

Inspection

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *10/12/2021*

Inspection Dates and Department Representative

10/12/2021 - 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: *5*

Number of Residents Who:

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

Inspections / Reviews

10/12/2021 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/25/2021*

Inspections / Reviews *(continued)*

11/2/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *11/05/2021*

11/10/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

18 - Compliance With Laws

1. Requirements

2600.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

In accordance with The Care Facility Carbon Monoxide Alarms Standards Act, enacted 6/23/2016, an approved carbon monoxide alarm at a care facility shall be installed in close proximity of, but not less than 15 feet from any fossil fuel-burning device or appliance. However, at approximately 10:55 a.m. in the home's furnace and hot water tank room, there is a hard-wired carbon monoxide detector located on the ceiling approximately seven feet from where the gas line enters the home's AO Smith natural gas fired hot water tank.

18 - Compliance With Laws (continued)

Plan of Correction

Accept

2600.18

Why did it happen?

A professional company was paid to install a hard-wired carbon monoxide detector at the facility. The same company was paid to relocate the carbon monoxide detector in 2020.

What do we do right now to fix the problem?

WHO home owner/administrator

WHAT relocated the carbon monoxide detector approximately 18 feet away from the fossil fuel source to a location suggested by the state inspector.

WHEN During inspection 10/12/21 (see attached picture)

How do we prevent this from happening again?

The carbon monoxide detector is hard-wired. The alarm will never be moved.

2600.85.d

Why did it happen?

Lack of staff education

What do we do right now to fix the problem?

WHO home owner/administrator

WHAT replaced the lid on the trash can (see attached picture)

WHEN During inspection 10/12/21

How do we prevent this from happening again?

The carbon monoxide detector is hard-wired. The alarm will never be moved.

Completion Date: 10/12/2021

Document Submission

Implemented

SEE ATTACHED PHOTO

85d - Trash Receptacles

1. Requirements

2600.

85.d. Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

85d - Trash Receptacles (continued)

Description of Violation

At approximately 11:26 a.m. in the common shower and bathroom there is a trash can with no lid containing used briefs from an unknown resident.

Plan of Correction

Accept

2600.85.d

Why did it happen?

Lack of staff education

What do we do right now to fix the problem?

WHO home owner/administrator

WHAT replaced the lid on the trash can (see attached picture)

WHEN During inspection 10/12/21

How do we prevent this from happening again?

WHO Home Supervisor

WHAT Educated staff on regulation 2600.85.d (see attached). Home supervisor will check all trash cans weekly x 3 months to ensure there are lids on the trash cans and documentation will be kept (see attached)

WHEN weekly x 3 months

Completion Date: 01/10/2022

Document Submission

Implemented

SEE ATTACHED DOCUMENTATION

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

The door to resident room #206 is unable to latch to the strike plate and cannot be locked.

88a - Surfaces (continued)

Plan of Correction**Accept***2600.88.a**Why did it happen?**The room was not occupied by a resident and the door not locking was never added to the maintenance list.**What do we do right now to fix the problem?**Strike plate adjusted on 10/15/21 - door is now able to be locked**WHO home owner/administrator**WHAT adjusted the strike plate**WHEN 10/15/2021**How do we prevent this from happening again?**Administrator or designated staff person will check locks on all resident room doors and bathroom doors to ensure they lock.**WHO Home Supervisor**WHAT All door locks were checked on 10/15/21. All door locks will be checked monthly. Documentation will be kept (see attached)**WHEN monthly***Completion Date: 10/15/2021**

88a - Surfaces (continued)**Document Submission****Implemented***SEE ATTACHED DOCUMENTATION***89b - Hot Water Temperature****1. Requirements**

2600.

89.b. Hot water temperature in areas accessible to the resident may not exceed 120°F.

Description of Violation

At approximately 11:15 a.m. in the home's dining area, the water at the kitchen sink measured 128.3 degrees Fahrenheit.

At approximately 11:30 a.m. in the home's common shower and bathroom the water temperature at the left sink measured 132 degrees Fahrenheit.

At approximately 11:50 a.m. in the half bathroom off of resident rooms 106 and 107 the water at the sink measured 130.1 degrees Fahrenheit.

89b - Hot Water Temperature *(continued)***Plan of Correction****Accept***2600.89.b**Why did it happen?**Hot water tank needed adjusted**What do we do right now to fix the problem?**Hot water tank temperature was turned down during inspection**WHO home owner/administrator**WHAT turned down hot water temperature**WHEN 10/12/2021**How do we prevent this from happening again?**Administrator or designated staff person will check hot water temp weekly x 3 months then monthly to ensure water temp does not exceed 120F**WHO Home Supervisor**WHAT Hot water temperature was turned down during inspection. Hot water temps will be checked weekly x 3 months then monthly. Documentation will be kept (see attached)**WHEN weekly x 3months then monthly*

89b - Hot Water Temperature (continued)**Document Submission****Implemented***SEE ATTACHED DOCUMENTATION***105g - Lint Removal and Duct Cleaning****1. Requirements**

2600.

105.g. To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

Description of Violation

At approximately 10:40 a.m. to the right of the home's basement exit located underneath the wooden rear deck. There is external ductwork from the homes clothes dryers that is capped with two plastic protective grates. The top grate was packed full of lint and what appeared to be small pieces of paper, and there was a buildup of lint residue on the ground in front of the grated ductwork that was approximately 1/2 inch thick.

105g - Lint Removal and Duct Cleaning (*continued*)**Plan of Correction****Accept**

Why did it happen?

The staff member designated to check external duct work has been off from work on extended medical leave.

What do we do right now to fix the problem?

Vent/trap was cleaned during inspection on 10/12/21.

WHO home owner/administrator

WHAT cleaned external vent and trap

WHEN 10/12/2021

How do we prevent this from happening again?

Task has been assigned to afternoon shift on Wednesdays instead of a specific person. Administrator or designated staff person will check vent/trap weekly x 3 months then monthly to ensure the vent/trap is being cleaned by designated shift (see attached documentation)

WHO Administrator or designated person

WHAT External lint trap/vent was cleaned during inspection. External trap/vent will be checked weekly x 3 months then monthly. Documentation will be kept (see attached)

WHEN weekly x 3 months then monthly

Completion Date: *10/12/2021*

10/12/2021

10 of 11

105g - Lint Removal and Duct Cleaning (*continued*)

Document Submission

Implemented

SEE ATTACHED DOCUMENTATION