

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

March 22, 2023

[REDACTED]  
HILLSIDE MANOR PERSONAL CARE HOME INC  
177 OLIVER ROAD  
UNIONTOWN, PA, 15401

RE: HILLSIDE MANOR PERSONAL CARE  
HOME  
177 OLIVER ROAD  
UNIONTOWN, PA, 15401  
LICENSE/COC#: 46799

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/22/2023, 02/23/2023, 02/24/2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,

[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: *HILLSIDE MANOR PERSONAL CARE HOME* License #: *46799* License Expiration: *04/16/2024*  
 Address: *177 OLIVER ROAD, UNIONTOWN, PA 15401*  
 County: *FAYETTE* Region: *WESTERN*

**Administrator**

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

**Legal Entity**

Name: *HILLSIDE MANOR PERSONAL CARE HOME INC*  
 Address: *177 OLIVER ROAD, UNIONTOWN, PA, 15401*  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *06/17/1996* Issued By: *L&I*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *56* Waking Staff: *42*

**Inspection Information**

Type: *Full* Notice: *Unannounced* BHA Docket #:  
 Reason: *Renewal, Complaint* Exit Conference Date: *02/24/2023*

**Inspection Dates and Department Representative**

02/22/2023 - On-Site: [REDACTED]  
 02/23/2023 - On-Site: [REDACTED]  
 02/24/2023 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: *76* Residents Served: *46*  
 Secured Dementia Care Unit  
 In Home: *No* Area: Capacity: Residents Served:  
 Hospice  
 Current Residents: *3*  
 Number of Residents Who:  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *46*  
 Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *10* Have Physical Disability: *1*

**Inspections / Reviews**

02/22/2023 - Full  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/10/2023*

Inspections / Reviews *(continued)*

03/14/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 03/20/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 03/21/2023

03/22/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/20/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

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

On 2/22/23 at approximately 11:55 a.m., the bedside light for resident #1 in shared resident bedroom # [redacted] was unplugged, and was not operational from bedside.

REPEAT VIOLATION 3/28/22 et. al.

Plan of Correction

Accept (JK - 03/14/2023)

2600.101.j

Why did it happen?

Resident #1 is alert/oriented and still [redacted]. Resident #1 unplugged the lamp so they could plug in cell phone charger and lap top charger.

What do we do right now to fix the problem:

Immediately plugged in light while inspector on site

Who? Facility supervisor

What? Installed touch light at bedside (see attached photo)

When? 03/08/2023

How do we prevent this from happening again?

Housekeeping staff will be educated to ensure all resident's lamps are plugged in

Who? Facility supervisor

What? Housekeeping staff will be educated to inspect all lamps to ensure they are plugged in and operational when doing daily room checks

When? All housekeeping staff will be educated on checking lamps to ensure they are plugged in and operational by 03/17/2023 (documentation of education will be kept) and facility supervisor will check all lamps to ensure they are plugged in and operational monthly x 3 months (documentation will be kept)

Licensee's Proposed Overall Completion Date: 03/17/2023

Implemented (JK - 03/22/2023)

101r - Bedroom - shades/drapes/window covering

2. Requirements

2600.

101.r. There must be drapes, shades, curtains, blinds or shutters on the bedroom windows. Window coverings must be clean, in good repair, provide privacy and cover the entire window when drawn.

Description of Violation

On 2/22/23 at approximately 11:38 a.m. the window blinds mounted above the only window in resident room [redacted] belonging to resident #2 had a broken slat and did not cover the entire window when drawn.

Plan of Correction

Accept (JK - 03/14/2023)

2600.101.r

**101r - Bedroom - shades/drapes/window covering (continued)**

*Why did it happen?*

*Lack of communication/education.*

*What do we do right now to fix the problem:*

*Replaced blind*

*Who? Administrator*

*What? Replaced blind (see attached photo)*

*When? 03/08/2023*

*How do we prevent this from happening again? Education*

*Who? Facility supervisor*

*What? Housekeeping staff will be educated when doing daily room checks to ensure all resident's blinds are clean, in good repair, provide privacy and cover the entire window when drawn.*

*When? By 03/17/2023 (documentation of education will be kept) and facility supervisor will check all blinds to ensure they are clean, in good repair, provide privacy and cover the entire window when drawn monthly x 3 months (documentation will be kept).*

**Licensee's Proposed Overall Completion Date: 03/17/2023**

**Implemented (JK - 03/22/2023)**

**103g - Storing Food****3. Requirements**

2600.

103.g. Food shall be stored in closed or sealed containers.

**Description of Violation**

*On 2/22/23 at approximately 11:00 a.m. there were multiple bags of food that were not stored in sealed or closed containers to include:*

*1 – 35 ounce bag of Rice Krispy's, approximately one sixth full*

*1 – 35 ounce bag of Toasted Oats, approximately one third full*

*1 – 10 pound bag of rotini pasta in a clear plastic bag, approximately one tenth full*

*1 – 160 ounce bag of Barilla bowtie noodles, approximately one quarter full*

*1 – 35 ounce bag of Corn Flakes, approximately one third full*

**Plan of Correction**

**Accept (JK - 03/14/2023)**

2600.103.g

*Why did it happen? The bags were less than 1/2 full, the staff twisted the bags at the top to secure them instead of using a clip.*

*What do we do right now to fix the problem: While administrator on site, clips were placed on the bags.*

*Who? Kitchen supervisor*

*What? Secured bags with clips*

*When? 02/22/2023*

*How do we prevent this from happening again? Education*

*Who? Facility supervisor*

*What? Kitchen staff will be educated that all food shall be stored in closed or sealed containers.*

*When? By 03/17/2023 (documentation will be kept) and facility supervisor will inspect the kitchen every other*

**103g - Storing Food (continued)**

*week x 3 months to ensure food is stored in closed or sealed containers (documentation will be kept).*

**Licensee's Proposed Overall Completion Date: 03/17/2023**

***Implemented (JK - 03/22/2023)***

**162e - Menu Changes****4. Requirements**

2600.

162.e. A change to a menu shall be posted in a conspicuous and public place in the home and shall be accessible to a resident in advance of the meal. Meal substitutions shall be made in accordance with § 2600.161 (relating to nutritional adequacy).

**Description of Violation**

*On 2/22/23, scrambled eggs were listed on the menu for the breakfast meal. However, ancillary staff person A indicated that sausage was served instead. The change to the breakfast meal was not posted in a conspicuous and public place in the home in advance of the meal.*

**Plan of Correction**

***Accept (JK - 03/14/2023)***

*2600.162.e*

*Why did it happen? Ancillary staff person A forgot to update the posted menu*

*What do we do right now to fix the problem: Education*

*Who? Administrative staff*

*What? Educated kitchen staff present during inspection that any changes to the menu must be updated on the posted menu prior to the meal*

*When? 02/22/2023*

*How do we prevent this from happening again? Education*

*Who? Facility supervisor*

*What? Kitchen staff will be re-educated that any changes to the menu must be updated on the posted menu prior to the meal*

*When? By 03/17/2023 (documentation will be kept) and facility supervisor will monitor one meal every week x 2 months to ensure the menu matches what is served or the posted menu has been updated if the posted menu changes (documentation will be kept).*

**Licensee's Proposed Overall Completion Date: 03/17/2023**

***Implemented (JK - 03/22/2023)***

**184a - Resident's Meds Labeled****5. Requirements**

2600.

184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

**Description of Violation**

*The pharmacy label for resident #1's Insulin Lispro 100 UNIT/ML Pen indicates "Inject sub-Q per sliding scale before meals: 0-59=0U, 60-149=0U, 159-199=3U, 200-249=5U, 250-50-199=3U, 200-249=5U, 250-" and does not include*

**184a - Resident's Meds Labeled (continued)**

*the complete sliding scale range of: 0-59=0U, 60-149=0U, 159-199=3U, 200-249=5U, 250-299=7U, 300-349=10U, 350-399=12U, 400-999=14U and call MD.*

**Plan of Correction****Accept (JK - 03/14/2023)**

2600.184.a

*Why did it happen? The pharmacy stated that the label was a 2-part label and they only placed one label instead of both of them on the insulin.*

*What do we do right now to fix the problem: The pharmacy was contacted and they sent a new bag with the complete instructions on 2/24/2023 (see attached photo)*

*Who? Facility supervisor*

*What? Contacted pharmacy immediately for a new label*

*When? 02/24/2023*

*How do we prevent this from happening again? Medication labels will be checked for complete order on meds that are delivered from the pharmacy and the facility is changing pharmacies.*

*Who? Nurse Practitioner and facility supervisor*

*What? Will check the labels on all medications for complete order*

*When? All current medication labels will be checked by 03/17/2023 (documentation will be kept) and all new medications that are delivered will be checked daily for one week then monthly x 3 months (documentation will be kept).*

**Licensee's Proposed Overall Completion Date: 03/17/2023**

**Implemented (JK - 03/22/2023)**