

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

May 18, 2023

[REDACTED]
Somerset Senior Living Operating Company LLC
166 Siemon Drive
Somerset, PA, 15501

RE: SOMERSET SENIOR LIVING
166 Siemon Drive
Somerset, PA, 15501
LICENSE/COC#: 33880

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/20/2023 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: SOMERSET SENIOR LIVING **License #:** 33880 **License Expiration:**

Address: 166 Siemon Drive, Somerset, PA 15501

County: SOMERSET **Region:** CENTRAL

Administrator

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

Legal Entity

Name: Somerset Senior Living Operating Company LLC

Address: 166 Siemon Drive, Somerset, PA, 15501

Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C 2 LP **Date:** 08/16/2000 **Issued By:** Department of Labor and Industry

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 34 **Waking Staff:** 26

Inspection Information

Type: Partial **Notice:** Announced **BHA Docket #:**

Reason: Change Legal Entity **Exit Conference Date:** 04/20/2023

Inspection Dates and Department Representative

04/20/2023 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: **Residents Served:** 29

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:** 29

Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0

Have Mobility Need: 5 **Have Physical Disability:** 0

Inspections / Reviews

04/20/2023 - Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 05/04/2023

05/05/2023 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 05/17/2023

Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 05/12/2023

Inspections / Reviews *(continued)*

05/11/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/17/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 05/18/2023

05/18/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/17/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

86b - Bathroom

1. Requirements

2600.

86.b. A bathroom that does not have an operable, outside window shall be equipped with an exhaust fan for ventilation.

Description of Violation

The bathrooms located in resident rooms [redacted] and [redacted], do not have an operable window or ventilation fan. The exhaust fans was observed to be inoperable at the time of inspection on 4.20.23.

Plan of Correction

Accept ([redacted] - 05/11/2023)

DHS identified rooms [redacted] and [redacted] as not having an operable window or ventilation system in the resident bathrooms. Maintenance notified [redacted] of the issue and an assessment of the ventilation system was conducted on 4/27/2023. It was determined at that time that the ventilation system in the bathrooms of room [redacted] and [redacted] can function if repaired. [redacted] will be providing a quote for those repairs. At the time of this entry, Executive Director is awaiting a detailed report and quote for the price of repairs to submit at the corporate level for approval, which should be received by 5/31/23.

Should [redacted] be unable to complete the repairs. Facility Maintenance staff will replace each individual ventilation fan in the bathrooms with a combination light/fan unit. These repairs will be done on a rolling schedule beginning no later than 7/1/2023 until all effected bathrooms are properly ventilated. Approximately 5 rooms will be repaired monthly, provided materials can be obtained in a timely manner. The approximate date for the completion of these repairs would be 12/31/2023.

Once repairs are completed, Maintenance Director or Designee will conduct a monthly audit of the system to ensure the exhaust fans in the bathrooms are functional and in good working order. If [redacted] is able to complete the repairs, Audits will begin approximately 7/1/2023. If Facility Maintenance is needed to complete the repairs, Audits will begin approximately 8/1/2023.

Until repairs can be made to the ventilation system, staff were advised by the Executive Director on 5/2/23 to open the bathroom doors halfway leading into the resident rooms to allow steam and moisture to escape the bathrooms while showering residents. All efforts will be made to maintain the privacy and dignity of residents who have shared living spaces during showers, until repairs can be completed. Residents who share living spaces will be encouraged to rest in public spaces while their roommates are being showered. Should they choose to not rest in a public space, they will be encouraged to be seated in their rooms in an area outside of the view of the Bathrooms. As the bathrooms are near the entrances of each room, there are plenty of areas roommates can rest in their rooms that are out of view of the bathrooms.

Licensee's Proposed Overall Completion Date: 05/31/2023

Implemented ([redacted] - 05/18/2023)

132a - Monthly Fire Drill

2. Requirements

2600.

132.a. An unannounced fire drill shall be held at least once a month.

Description of Violation

An unannounced fire drill was not held during the months of October 2022 through February 2023.

Plan of Correction

Accept ([redacted] - 05/11/2023)

Administrator and Maintenance Director met to discuss fire drills and past practice on 4/26/2023. Maintenance

132a - Monthly Fire Drill (continued)

Director will be point-person, as of 4/26/2023 going forward for all fire drills. Maintenance Director will be responsible for completing Fire Drill Record forms after each monthly drill. Executive Director or Director of Wellness will be the secondary people responsible in the absence of the Maintenance Director. Shifts and Days of unannounced drills will be rotated monthly starting 4/27/2023. Copies of completed forms will be kept in the Executive Director's Office and the Maintenance Director's office starting 4/27/2023. April drill was completed on 4/27/2023, and copies of records were placed in both locations for future reference.

Licensee's Proposed Overall Completion Date: 05/12/2023

Implemented ([REDACTED]) - 05/18/2023)

183e Storing Medications

3. Requirements

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

Description of Violation

On 4/20/23, at 11:38 AM 2 5ML Vials of [REDACTED], was observed lying loose inside the South Hall Medication Cart.

Plan of Correction

Accept ([REDACTED]) - 05/11/2023)

Administrator and Med Tech removed the 2 vials of [REDACTED] from the med cart on 4/20/2023 and disposed of in a safe manner. Administrator completed re-education with all Medication Techs on 4/26/2023 on the proper storage of medication and regulation 183e. Starting the week of 5/8/2023, Director of Wellness, or designee, will perform monthly med cart audits for 3 months to ensure ongoing storage compliance.

Licensee's Proposed Overall Completion Date: 05/12/2023

Implemented ([REDACTED]) - 05/18/2023)