

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

September 18, 2025

[REDACTED]
NORTHVIEW ESTATES LIMITED PARTNERSHIP
[REDACTED]

RE: NORTHVIEW ESTATES
945 BORDER AVENUE
ELLWOOD CITY, PA, 16117
LICENSE/COC#: 40499

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/22/2025, 08/18/2025 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: NORTHVIEW ESTATES License #: 40499 License Expiration: 01/24/2026
 Address: 945 BORDER AVENUE, ELLWOOD CITY, PA 16117
 County: LAWRENCE Region: WESTERN

Administrator

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

Legal Entity

Name: NORTHVIEW ESTATES LIMITED PARTNERSHIP
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 09/10/2001 Issued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 62 Waking Staff: 47

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Complaint, Incident Exit Conference Date: 08/18/2025

Inspection Dates and Department Representative

07/22/2025 - On-Site: [REDACTED]
 08/18/2025 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 75 Residents Served: 54

Secured Dementia Care Unit
 In Home: Yes Area: SDCU Capacity: 10 Residents Served: 8

Hospice
 Current Residents: 3

Number of Residents Who:
 Receive Supplemental Security Income: 2 Are 60 Years of Age or Older: 53
 Diagnosed with Mental Illness: 21 Diagnosed with Intellectual Disability: 5
 Have Mobility Need: 8 Have Physical Disability: 1

Inspections / Reviews

07/22/2025 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 09/12/2025

09/12/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 09/18/2025
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 09/19/2025

Inspections / Reviews *(continued)*

09/16/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/18/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 09/19/2025

09/18/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/18/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

225c - Additional Assessment

1. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

1. Annually.
2. If the condition of the resident significantly changes prior to the annual assessment.
3. At the request of the Department upon cause to believe that an update is required.

Description of Violation

Resident [REDACTED] assessment, dated [REDACTED], indicated minimal irritability, minimal agitation, and minimal aggression. However, beginning [REDACTED] until [REDACTED] the home had documentation of behaviors for the resident to include requiring three staff persons to assist the resident due to resident [REDACTED] becoming physically combative with staff. The resident had often punched staff, spit on staff, screamed and swore at staff and refused care. These needs were not addressed on the current assessment.

Plan of Correction

Accept [REDACTED] - 09/16/2025)

1. The facility's RASP Policy was updated by the Administrator on 9/11/25. The update included the need to address specific behaviors on the RASP and the need to update the RASP upon a significant change to the resident. The Administrator also updated the RASP policy to include the completion of a RASP Summary by the Resident Care Coordinator and the Care Manager of the Dementia Unit.
2. The facility policy on RASP will be reviewed by the Administrator with all staff responsible for completing RASPs by 9/12/25.
3. Beginning 9/12/25 the Administrator will review all RASP Summary Reports weekly to ensure RASPs are being updated properly and addressing any changes to resident conditions.
4. Resident 1 was admitted to a skilled facility for rehabilitation on 5/12/25.

Licensee's Proposed Overall Completion Date: 09/16/2025

Implemented [REDACTED] - 09/18/2025)

228b - Discharge or Transfer

2. Requirements

2600.

228.b. If the home initiates a discharge or transfer of a resident, or if the legal entity chooses to close the home, the home shall provide a 30-day advance written notice to the resident, the resident's designated person and the referral agent citing the reasons for the discharge or transfer. This shall be stipulated in the resident-home contract. A 30-day advance written notice is not required if a delay in discharge or transfer would jeopardize the health, safety or well-being of the resident or others in the home, as certified by a physician or the Department. This may occur when the resident needs psychiatric or long-term care or is abused in the home, or the Department initiates closure of the home.

Description of Violation

On [REDACTED], the home refused to allow resident [REDACTED] to be discharged from the hospital back to the home. The home did not provide a 30-day advance written notice to the resident, nor the resident's designated person.

Plan of Correction

Accept [REDACTED] - 09/12/2025)

1. The facility policy on Description of Services was updated by the Administrator on 9/11/25 to include the statement that residents will not be denied readmission back into the facility if sent to the hospital and the requirement of staff to notify the Administrator and or Resident Care Coordinator of a residents change in condition.
2. The Administrator will review the newly updated Description of Services policy with the Resident Care

228b Discharge or Transfer (continued)

Coordinator, all nurses, all Care Managers, all Med Techs and the office manager by 9/12/25.

3. Beginning 9/11/25 the Administrator and Resident Care Coordinator will be informed of all hospitalizations to ensure residents are able to be discharged back into the home or an appropriate plan is in place to ensure ongoing compliance.

Licensee's Proposed Overall Completion Date: 09/12/2025

Implemented [REDACTED] - 09/18/2025)