

Department of Human Services
Bureau of Human Service Licensing

May 4, 2021

██████████ ADMINISTRATOR
MT. ASSISI PLACE LLC
100 LEGACY DRIVE
SEWICKLEY, PA 15143

RE: MT. ASSISI PLACE
934 FOREST AVENUE
BELLEVUE, PA, 15202
LICENSE/COC#: 45020

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 03/15/2021 of the above facility, the citations specified on the enclosed Licensing Inspection Summary (LIS) were found.

We have determined that your plan of correction is: Acceptable

All citations specified on the plan of correction must be corrected by the dates specified on the License Inspection Summary (violation report) and continued compliance with Department statutes and regulations 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 - PUBLIC**

Facility Information

Name: MT. ASSISI PLACE **License #:** 45020 **License Expiration Date:** 08/01/2021
Address: 934 FOREST AVENUE, BELLEVUE, PA 15202
County: ALLEGHENY **Region:** WESTERN

Administrator

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

Legal Entity

Name: MT. ASSISI PLACE LLC
Address: 100 LEGACY DRIVE, SEWICKLEY, PA, 15143
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 12/19/2000 **Issued By:** L&I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 67 **Waking Staff:** 50

Inspection

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Monitoring **Exit Conference Date:** 03/15/2021

Inspection Dates and Department Representative

03/15/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 81 **Residents Served:** 50

Secured Dementia Care Unit

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

Hospice

Current Residents: 4

Number of Residents Who:

Receive Supplemental Security Income: 13 **Are 60 Year of Age or Older:** 50
Diagnosed with Mental Illness: 3 **Diagnosed with Intellectual Disability:** 1
Have Mobility Need: 17 **Have Physical Disability:** 1

Inspections / Reviews

03/15/2021 - Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 04/19/2021

Inspections / Reviews *(continued)*

4/22/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*

Follow-Up Date: *04/29/2021*

5/4/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *05/12/2021*

81b - Resident Personal Equipment

1. Requirements

2600.

- 81.b. Wheelchairs, walkers, prosthetic devices and other apparatus used by residents must be clean, in good repair and free of hazards.

Description of Violation

The 9" x 3" opening between the rails of the uncovered, unsecured enabler bar on resident #1's bed posed an entrapment hazard. The device was not securely attached to the bedframe and could be moved back and forth approximately 3", posing an entrapment/fall hazard.

Plan of Correction

Directed

The bar on Resident #1's bed was replaced with a newly purchased bar and secured to the bedframe. Picture sent in an email. Bar will be covered to prevent entrapment hazard. Direct care staff and the maintenance staff will be reeducated on the bed rails and entrapment hazards by the director of resident care/designee. Designated maintenance staff person will inspect all enablers bi-weekly that are currently in use to ensure that they are securely attached to the bed frame

Directed-

mmediately upon receipt, all resident bars/enablers shall be covered to prevent entrapment hazards. Documentation shall be kept.

S.Q. 5/4/21

Within 48 hours of receipt, staff shall be educated as indicated above. Documentation shall be kept.

S.Q. 5/4/21

mmediately upon receipt and at least bi-weekly thereafter, a designated staff person shall inspect all canes/enablers currently in use

by residents, to ensure they are securely attached to the bed frame in accordance with the manufacturer's instructions. All canes/enablers shall be covered to reduce the risk of limb entrapment. Documentation of bi-weekly inspections shall be kept.

S.Q. 5/4/21

Completion Date: 04/29/2021

91 - Telephone Numbers

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

There are no emergency telephone numbers to include the nearest hospital and fire department on or by the telephone in the kitchen next to the ice maker.

91 - Telephone Numbers (*continued*)**Plan of Correction****Directed**

Emergency telephone numbers were posted by the phone near the ice maker in kitchen before the surveyors left the building. Picture sent in email. All staff will be reeducated by the director of resident care/designee on the requirement that emergency numbers must be posted on or near any telephone with an outside line. The activity staff/designated staff person will inspect the home weekly to ensure that the emergency numbers are posted on or near all phones with outside lines.

Directed-

Within 5 days of receipt, staff shall be educated as indicated above. Documentation shall be kept.

S.Q. 5/4/21

Within 7 days of receipt and at least weekly thereafter, inspections shall be conducted as indicated above. Telephone numbers shall immediately be posted on or near any phones found to be missing this information. Documentation of inspections shall be kept.

S.Q. 5/4/21

Completion Date: 04/29/2021

103g - Storing Food

1. Requirements

2600.

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

Description of Violation

There was an unsealed 5 pound bag of tater tots in the walk in freezer.

Plan of Correction**Directed**

Tater tot bag was resealed immediately, but then discarded by the kitchen manager, The kitchen staff will be reeducated by the kitchen manager that all food must be stored in closed sealed containers. The kitchen manager/designee will inspect food storage areas to ensure that food is stored in closed or sealed containers.

Directed:

Within 5 days of receipt, staff shall be educated as indicated above. Documentation shall be kept.

S.Q. 5/4/21

Immediately upon receipt and at least daily thereafter, a designated staff person shall inspect all food storage areas to ensure food is stored in closed or sealed containers. Documentation shall be kept.

S.Q. 5/4/21

Completion Date: 04/29/2021