



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**

**MAILING DATE:** OCT 16 8 2013

Mr. Barry A. Lazarus, Vice President  
Arden Courts of Monroeville PA, LLC  
333 North Summit Street  
Toledo, Ohio 43604

RE: Arden Courts of Monroeville  
120 Wyngate Drive  
Monroeville, Pennsylvania 15146

Dear Mr. Lazarus:

As a result of the Department of Public Welfare's (Department) licensing inspection on September 17, 2013, of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Human Services Licensing so that compliance can be verified.

Sincerely,

Maria Stepanovich  
Regional Licensing Administrator

Enclosure(s)

**VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: ARDEN COURTS OF MONROEVILLE		License Number: 43552
Address: 120 WYNGATE DRIVE, MONROEVILLE, PA 15146		County: Allegheny
Administrator: Ella Bostedo		Region: WEST
Legal Entity Name: ARDEN COURTS OF MONROEVILLE PA LLC		
Legal Entity Address: 333 NORTH SUMMIT STREET, TOLEDO, OH 43604		<b>RECEIVED</b>
Certificate(s) of Occupancy C-2 LP 09/22/1998 L&I		OCT 04 2013 <b>WEST REGION FIELD OFFICE Human Services Licensing</b>
<b>Staffing Hours</b>		
Resident Support: 0	Total Daily Staff: 112	Waking Staff: 84
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
<b>Reason(s) for Inspection(s)</b> Incident		
<b>On-Site Inspections Dates and Department Representatives On-Site</b> 09/17/2013: Mazza, Larry 09/17/2013: Rosol, Jennifer		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b>		
<b>Other Details</b>		
Partial or Full Triggers: N/A		Random Indicators: N/A
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 56 Number of Residents Served: 56 Secured Dementia Care Unit in Home: Yes Area: Building is licensed as a SDCU Secured Dementia Unit Capacity, if Applicable: 56 Number of Residents Served In Secured Dementia Care Unit, if applicable: 56 Number of Current Hospice Residents: 17 Number of Hospice Residents in past year: 50		<b>Number of Residents who:</b> Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 56 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 56 Have a Physical Disability: 1

Violation Report: 43552 - 09/17/2013 - Mazza, Larry  
 PCH Name: ARDEN COURTS OF MONROEVILLE

**RECEIVED**

1. REGULATION 55 Pa.Code §2600  
 2600.89(b) - Hot water temperature in areas accessible to the resident may not exceed 120°F.

OCT 04 2013

2a. DESCRIPTION OF VIOLATION

At 10:06 am, the hot water temperature at the sink in the public restroom of the lobby measured 143.9 degrees Fahrenheit.

At 10:10 am, the hot water temperature, at the sink in the bathroom of bedroom #33 in the "Cottage", measured 127.5 degrees Fahrenheit and at 11:40 am, it measured 125 degrees Fahrenheit.

WEST REGION FIELD OFFICE  
 Human Services License

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

- ① MIXING VALVE HAS BEEN INSTALLED ON LOBBY BATHROOM SINK 10-3-2013 BY [REDACTED] PLUMBING. IT IS ADJUSTED TO CONTROL WATER TEMPERATURE. (SEE ATTACHED PHOTO)
- ② MIXING VALVE IN COTTAGE WAS ADJUSTED 9-17-2013
- ③ WATER TEMPERATURES WILL CONTINUE TO BE TAKEN DAILY. ANY DEVIATIONS WILL BE ADDRESSED IMMEDIATELY.
- ④ ATTACHED ARE READINGS OF TEMPERATURES IN ROOM 33 AND LOBBY BATHROOM BEGINNING 9-18-13

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *Ella Postedo*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <b>ELLA POSTEDO DIRECTOR</b>	Date <b>10-4-2013</b>
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of <u>10/5/13</u> (Date)	Plan of correction implementation status as of <u>10/8/13</u> (Date)
The above plan of correction was approved by <u>MS</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress MS <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented