



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: November 28, 2016

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
License #435520

Dear Mr. Lazarus:

As a result of the Department of Human Services' licensing inspection on October 18, 2016, of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Brent Sutherland /s/".

Brent Sutherland
Acting Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

NOV 11 2016

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Violation Report: 43552 - 10/18/2016 - Summers, Vicky
PCH Name: ARDEN COURTS OF MONROEVILLE

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.231(b) - A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner, documented on a form provided by the Department, within 60 days prior to admission. Documentation shall include the resident's diagnosis of Alzheimer's disease or other dementia and the need for the resident to be served in a secured dementia care unit.

2a. DESCRIPTION OF VIOLATION

Resident #1 was admitted to the secured dementia care unit on [redacted] 16; however, the resident's medical evaluation was completed on 3/10/16.

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.

UPON COMPLETION OF EXIT INTERVIEW CHARTS WERE AUDITED BY EXECUTIVE DIRECTOR FOR COMPLIANCE OF REGULATION 2600.231(b)
EXECUTIVE DIRECTOR AND RESIDENT SERVICES COORDINATOR WILL REVIEW ALL FUTURE MEDICAL EVALUATIONS TO ASSURE COMPLIANCE WITH REGULATION 2600.231(b)
TRAINING CONDUCTED FOR RESIDENT SERVICES SUPERVISOR AND RESIDENT SERVICES COORDINATOR 11-9-16 REGARDING REGULATION 2600.231(b)

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Ella Bostedo

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page)

ELLA BOSTEDO EXECUTIVE DIRECTOR

Date

11-10-16

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of

11/15/16
(Date)

Plan of correction implementation status as of

11/15/16
(Date)

- Fully Implemented
- Partially Implemented - Adequate Progress *BS*
- Partially Implemented - Inadequate Progress
- Not Implemented

The above plan of correction was approved by

BS
(Initials)