



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to ARTIS SENIOR LIVING OF LOWER MORELAND LLC
LEGAL ENTITY

To operate ARTIS SENIOR LIVING OF HUNTINGDON VALLEY
NAME OF FACILITY OR AGENCY

Located at 2085 LIEBERMAN DRIVE, HUNTINGDON VALLEY, PA 19006
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

To provide Personal Care Homes
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 72
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller. (MAXIMUM CAPACITY)
Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 72

Restrictions: _____

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from July 18, 2017 until July 18, 2018,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 142790

Robert E. Robinson
ISSUING OFFICER

Jay Baul
DIRECTOR

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JUL 18 2017

Mr. Donald E. Feltman,
President
Artis Senior Living of Lower Moreland, LLC
680 American Avenue, Suite 101
King of Prussia, Pennsylvania 19406

RE: Artis Senior Living of Huntingdon Valley
2805 Lieberman Drive
Huntingdon Valley, Pennsylvania 19006
License #: 142790

Dear Mr. Feltman:

As a result of the Department of Human Services' annual licensing inspections on April 19, 2017 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.

A regular license is being issued based on the enclosed License Inspection Summary. Your license is enclosed.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

Mr. Donald E. Feltman

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The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosures
License
License Inspection Summary

Violation Report: 14270 - 04/10/2017 - Thomas, Tahosla
 PCH Name: ARTIS SENIOR LIVING OF HUNTINGDON VALLEY

1. REGULATION 56 Pa.Code §2600
 2600.51 - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (OAPSA) (35 P.S. §§ 10225.101-10225.6102) and 6 Pa.Code Chapter 16 (relating to protective services for older adults).

2a. DESCRIPTION OF VIOLATION
 Staff Member A's criminal background check, hired [redacted] 16, was requested on [redacted] 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.

2600.51--Our hiring policy requires every staff member to have criminal history checks in accordance with the Older Adult Protective Services Act, completed prior to start date.

Every staff member since "Staff Member A" has had a criminal history check prior to start date.

The administration is responsible for maintaining continual compliance @

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Sherry Nikish* Date *5/23/17*

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

The above plan of correction is approved as of *5/24/17*
 (Date)

Plan of correction implementation status as of *5/24/17*
 (Date)

The above plan of correction was approved by *[Signature]*
 (Initials)

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

Violation Report: 14279 - 04/19/2017 - Thomas, Tehesla PGH Name: ARTIS SENIOR LIVING OF HUNTINGDON VALLEY	
1. REGULATION 56 Pa.Code §2600 2600.132(b) - A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.	
2a. DESCRIPTION OF VIOLATION The home does not have a letter from a fire safety expert.	
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. 2600.132 (b)---We received a letter from a fire safety expert on May 1, 2017 from Fire Marshall [REDACTED] [REDACTED] (Please see attached letter) The administrator shall ensure continued compliance (u)	
Repeat Violation: No	Date(s) of Previous Violation(s):
Signature of Legal Entity Representative (Required on EVERY Page)	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!	
The above plan of correction is approved as of <u>5/24/17</u> (Date)	Plan of correction implementation status as of <u>5/24/17</u> (Date)
The above plan of correction was approved by <u>[Signature]</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 14278 - 04/19/2017 - Thomas, Tahesia
 PCH Name: ARTIS SENIOR LIVING OF HUNTINGDON VALLEY

1. REGULATION 68 Pa.Code §2800.
 2800.132(c) - A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

2a. DESCRIPTION OF VIOLATION
 The fire drill record for the drills conducted on 01/31/17, 02/27/17 and 03/31/17 did not include the specific exit route used by the home.

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.

2800.132 (c). The fire drill records for the drill conducted on 1/31/2017, 2/27/17, and 3/31/17 were amended to include the specific exit routes used.
 All fire drills since 3/31/17 have documentation which include the specific exit route used.

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Sherry Nikish* Date *5/10/17*

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


The above plan of correction is approved as of 6/9/17
 (Date)

Plan of correction implementation status as of 6/9/17
 (Date)

The above plan of correction was approved by [Signature]
 (Initials)

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

Violation Report: 14270 - 04/19/2017 - Thomas, Tahesia	
PGH Name: ARTIS SENIOR LIVING OF HUNTINGDON VALLEY	
1. REGULATION # Pa.Code §2600 2600.132(d) - Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.	
2a. DESCRIPTION OF VIOLATION The home does not have a designated evacuation time from a fire safety expert. The home's fire drill evacuation time, dated 01/31/17, was recorded at 4 minutes and 51 seconds.	
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.	
2600.132 (d). On April 27th a fire drill evacuation was conducted by Fire Marshall [REDACTED]. The fire letter includes a designated evacuation time. <i>The administrator is responsible for continued compliance (u)</i>	
Repeat Violation: No	Date(s) of Previous Violation(s):
Signature of Legal Entity Representative (Required on EVERY Page)	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	
Date	
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!	
The above plan of correction is approved as of <u>6/9/17</u> (Date)	Plan of correction implementation status as of <u>6/9/17</u> (Date)
The above plan of correction was approved by <u>(u)</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 14270 - 04/19/2017 - Thomas, Tahesia	
PCH Name: ARTIS SENIOR LIVING OF HUNTINGDON VALLEY	
<p>1. REGULATION 85 Pa. Code §2800 2600.191 - The home shall educate the resident on the right to question or refuse a medication if the resident believes there may be a medication error. Documentation of this resident education shall be kept.</p>	
<p>2a. DESCRIPTION OF VIOLATION. Resident # 1, # 2 and # 3 have not been educated to the resident's right to refuse medication if the resident believes that there may be a medication error.</p>	
<p>3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.) <i>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.</i></p> <p>2600.191. Resident #1, Resident #2, and Resident #3 were educated on their right to refuse medication if they believe that there may be a medication error. Documentation of the education is on file in the individual chart. Education completed by April 25th.</p>	
Repeat Violation: No	Date(s) of Previous Violation(s):
Signature of Legal Entity Representative (Required on EVERY Page)	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	
Date	
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!	
The above plan of correction is approved as of	Plan of correction implementation status as of
<u>6/18/17</u> (Date)	<u>6/19/17</u> (Date)
The above plan of correction was approved by	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented
 (Initials)	