



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: September 5, 2018

Mr. Martin D. Allen
Director
Arden Courts of Jefferson Hills PA, LLC
333 North Summit Street
Toledo, Ohio 43604

RE: Arden Courts of Jefferson Hills
380 Wray Large Road
Jefferson Hills, Pennsylvania 15025
Certificate #: 435510

Dear Mr. Allen:

As a result of the Department's Bureau of Human Services Licensing inspection on April 11, 2018, 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 cursive script that reads "Larry Mazza".

Larry Mazza
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

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

PCH Name: ARDEN COURTS OF JEFFERSON HILLS		License Number: 43551
Address: 380 WRAY LARGE ROAD, JEFFERSON HILLS, PA 15025		County: Allegheny
Administrator: Kristen Kahler		Region: WEST
Legal Entity Name: ARDEN COURTS OF JEFFERSON HILLS PA LLC		
Legal Entity Address: 333 NORTH SUMMIT STREET, TOLEDO, OH 43604		
Certificate(s) of Occupancy C2 LP 07/02/1999 L&I		RECEIVED AUG 20 2018 WEST REGION FIELD OFFICE Human Services Licensing
Staffing Hours		
Resident Support: 0	Total Daily Staff: 114	Waking Staff: 86
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Complaint, Incident		
On-Site Inspections Dates and Department Representatives On-Site 04/11/2018: Marini, Michael		
Off-Site Inspection Dates and Inspectors, if Applicable 07/03/2018: Marini, Michael		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 60 Number of Residents Served: 57 Secured Dementia Care Unit in Home: Yes Area: Entire building Secured Dementia Unit Capacity, if Applicable: 60 Number of Residents Served in Secured Dementia Care Unit, if applicable: 57 Number of Current Hospice Residents: 13 Number of Hospice Residents in past year: 75		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 55 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 57 Have a Physical Disability: 0

Violation Report: 43551 - 04/11/2018 - Marini, Michael
PCH Name: ARDEN COURTS OF JEFFERSON HILLS

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law).

2a. DESCRIPTION OF VIOLATION

At the end of March 2018, staff person A heard staff person B say to resident #1, "You're too fat. You don't need any more food." Staff person A reported the incident to staff person C, Director of Nursing, and staff person D, daylight supervisor; however, the home did not report the allegation to the Department.

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.

See attached.

See Page 2A of 3

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Kristin Kahler

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

Kristin Kahler, Executive Dir.

Date *8-20-18*

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

The above plan of correction is approved as of

8/23/18
(Date)

Plan of correction implementation status as of

8/23/18
(Date)

Fully Implemented

Partially Implemented - Adequate Progress *✓*

Partially Implemented - Inadequate Progress

Not Implemented

The above plan of correction was approved by

[Signature]
(Initials)

Arden Courts of Jefferson Hills

License #435510

Regulation 2600.16(c)

Staff person B is no longer employed by the facility.

The Director of Nursing and the nursing supervisors will be inserviced by the Executive Director on this regulation and the company's policy on reporting of incidents and conditions to the Department (see attached). This inservice will take place by 8/31/2018.

All incidents reported to the Department will be monitored at the quarterly Quality Management Committee meeting to ensure incidents were reported in accordance with Regulation 2600.16(c).

Kristin Kahler

Kristin Kahler, Exec. Dir.

8-20-18

AUG 20 2018

Violation Report: 43551 - 04/11/2018 - Marini, Michael

PCH Name: ARDEN COURTS OF JEFFERSON HILLS

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.42(b) - A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

2a. DESCRIPTION OF VIOLATION

From 11-19-18 through 3-26-18, resident #2 fell at least 12 times in the home. On 11-25-17, the resident began receiving physical therapy services; however, were completed on 12-29-17. The home implemented 15 minute checks of the resident; however, from 1-9-18 through 3-26-18, the resident fell 7 more times with no further interventions from the home. On 3-26-18 at approximately 10:45 AM, the resident was found on the floor in front of the closet in his/her bedroom. The resident had a 2" laceration to the top-left of his/her head and was sent to the hospital for evaluation. Resident #2 suffered numerous injuries due to the fall, including fractures of the C4, C5, and C6 vertebra and a subdural hematoma. Resident #2 passed away on resident #2's date of death from "blunt force trauma of the head and neck".

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See attached

See Page 3A of 3

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Signature of Legal Entity Representative
(Required on EVERY Page)

Kristin Kahler

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

Kristin Kahler, Executive Director

Date *8-20-18*

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8/23/18
(Date)

Plan of correction implementation status as of

8/23/18
(Date)

Fully Implemented

Partially Implemented - Adequate Progress *7*

Partially Implemented - Inadequate Progress

Not Implemented

The above plan of correction was approved by

[Signature]
(Initials)

Arden Courts of Jefferson Hills

License #435510

Regulation 2600.42(b)

A fall investigation tool has been implemented to help determine if environmental, medical, or other factors contributed to the resident's fall (see attached). This tool is completed by the nursing supervisor at the time of the fall, and appropriate interventions will be implemented as soon as possible. All falls will be reported to the resident's physician for additional recommendations to assist with fall prevention.

Immediately: All fall precautions and interventions shall be immediately indicated on resident assessments and support plans for 8/23/18

All fall reports and investigation tools will be reviewed by the Executive Director, Director of Nursing and/or designee at the facility's morning kick off meeting to monitor that the investigation was completed and appropriate interventions were implemented, as needed, following a resident's fall. This meeting has members from all departments in attendance for an interdisciplinary approach to reducing the risk of falling.

An inservice on falls management will be conducted for the managers and the nursing department by the Executive Director or designee on or before September 14, 2018.

The Quality Management Committee will review resident falls on at least a quarterly basis to monitor that interventions have been implemented and used appropriately to assist in reducing the risk of resident falls.

Kristin Kahler

Kristin Kahler, Executive Director
8-20-18