



**MAILING DATE: January 7, 2019**

Ms. Kristin Kahler  
Executive 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 Ms. Kahler:

As a result of the Department's Bureau of Human Services Licensing inspection on August 1, 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 black ink that reads "Jon B. Kimberland". The signature is written in a cursive style.

Jon Kimberland  
Human Services Licensing Supervisor

Enclosure  
Licensing Inspection Summary



Violation Report: 43551 - 08/01/2018 - Pfaff, Vicki  
 PCH Name: ARDEN COURTS OF JEFFERSON HILLS

**1. REGULATION 55 Pa.Code §2600**  
 2600.15(a) - The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 - 10225.707) and 6 Pa. Code Sections 15.21 - 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

**2a. DESCRIPTION OF VIOLATION**  
 Direct care staff person A alleged that on 7/24/18 at approximately 5:00 a.m., direct care staff person, B dragged resident #1 under the arms to get the resident back into bed then pinched the resident's cheeks while using profanity at the resident. However, the allegation of abuse was not reported to the Allegheny County Area Agency on Aging Protective Services until 7/24/18 at 10:30 a.m.

**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.

*Please see attached.*

See page 2A of 2

Repeat Violation: No	Date(s) of Previous Violation(s):		
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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, Exec. Dir.* Date *12-20-18*

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

The above plan of correction is approved as of <u>12/24/18</u> (Date)  The above plan of correction was approved by <u><i>[Signature]</i></u> (Initials)	Plan of correction implementation status as of <u>12/24/18</u> (Date) <input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>4</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented
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15 (a)

- 1) Staff will be in-serviced by the Executive Director by 1/4/2019 re. regulation 15 (a), including the staff member shall report the allegation of abuse immediately so that the home can immediately develop a plan of supervision or suspend the staff person involved in the alleged incident.
- 2) Resident incidents, i.e. allegation of abuse, are discussed during the Morning Kick-Off Meeting to ensure timely reporting compliance and implementation of a plan of supervision or suspension of a staff person involved in the incident.  
12/21/2018 and ongoing
- 3) The Office of Aging will conduct an in-service for all staff regarding regulation 15 (a), including reporting alleged abuse immediately on January 17, 2019.

*Kristin Kahler* 12-20-18.  
Kristin Kahler, Executive Director

12/24/18

*[Signature]*

Violation Report: 43551 - 08/01/2018 - Pfaff, Vicki  
 PCH Name: ARDEN COURTS OF JEFFERSON HILLS

**1. REGULATION 65 Pa.Code §2600**  
 2600.15(b) - If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

**2a. DESCRIPTION OF VIOLATION**  
 Direct care staff person A alleged that on 7/24/18 at approximately 5:00 a.m., direct care staff person, B dragged resident #1 under the arms to get the resident back into bed then pinched the resident's cheeks while using profanity at the resident. However, direct care staff person B continued to work providing unsupervised care to residents until 7:00 a.m. when the work shift ended.

**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.

*Please see attached*

See Page 3A of 3

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 (Required on EVERY Page) *Kristin Kahler*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Kristin Kahler, Executive Dir.* Date *12-20-18*

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 (Date)

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

Plan of correction implementation status as of 12/24/18  
 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress *[Signature]*
- Partially Implemented - Inadequate Progress
- Not Implemented

15 (b)

- 1) Direct staff person B was suspended on 7/24/2018 at approximately 10:00 AM. An investigation was completed concerning the allegation of abuse. Based on the investigation, Direct staff person B is no longer employed at the facility.
- 2) Staff will be in-serviced by the Executive Director by January 4, 2019 re. regulation 15 (b), including the staff member shall report the allegation of abuse immediately so that the home can immediately develop a plan of supervision or suspend the staff person involved in the alleged incident.
- 3) Resident incidents, i.e. allegation of abuse, are discussed during the Morning Kick-Off Meeting to ensure timely reporting compliance and implementation of a plan of supervision or suspension of a staff person involved in the incident.  
12/21/2018 and ongoing

The Office of Aging will conduct an in-service for all staff regarding regulation 15 (b), including implementation of a plan of supervision or suspension of a staff person involved in the incident on 1/17/2019.

*Kristin Kahler 12-20-18*  
*Kristin Kahler, Executive Director*

Immediately: The administrator shall monitor any allegations of abuse to ensure the alleged perpetrator is immediately suspended or placed on a plan of supervision approved by the Department. 12/24/18

12/24/18

Violation Report: 43551 - 08/01/2018 - Pfaff, Vicki  
 PCH Name: ARDEN COURTS OF JEFFERSON HILLS

1. REGULATION 55 Pa.Code §2600  
 2600.58(a) - If a home serves 16 or more residents, all direct care staff persons on duty in the home shall be awake at all times one or more residents are present in the home.

2a. DESCRIPTION OF VIOLATION  
 According to the admission of direct care staff person B and observations by coworkers present on the same shift, staff person B slept for approximately 15 minutes sometime between 4:30 a.m. & 5:00 a.m. during the work shift that took place from 7/23/18 at 11:00 p.m. through 7/24/18 at 7:00 a.m.

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.

*Please see attached*

See Page 4A of 4

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58 (a)

- 1) Direct staff person B was suspended on 7/24/2018 at approximately 10:00 AM.
- 2) An investigation was completed concerning the allegations of abuse and sleeping during the work shift.  
Based on the investigation, Direct staff person B is no longer employed at the facility
- 3) Staff will be in-serviced by the Executive Director by January 4, 2019 re. regulation 58 (a), including all direct care staff persons on duty in the home shall be awake at all times one or more residents in the home. Reporting of alleged violation of regulation 58 (a) immediately to the supervisor will also be reviewed.
- 4) Resident Services Supervisors and Coordinators will be in-serviced by January 24, 2019 by the Regional Human Resource Manager to ensure compliance with required human resource processes, including suspension, investigation, and termination.

*Kristin Kahler*      12-20-18  
*Kristin Kahler, Executive Director*

12/24/18

*g*

Violation Report: 43551 - 08/01/2018 - Pfaff, Vicki  
 PCH Name: ARDEN COURTS OF JEFFERSON HILLS

**1. REGULATION 55 Pa.Code §2600**

2600.85(i) - A record of training including the staff person trained, date, source, content, length of each course and copies of any certificates received, shall be kept.

**2a. DESCRIPTION OF VIOLATION**

The home does not have documentation that direct care staff person A, hired 7/10/18, received orientation within 40 scheduled working hours that included emergency medical plan and reporting of reportable incidents and conditions.

The home does not have documentation that direct care staff person B, hired 4/13/18, received orientation within 40 scheduled working hours that included emergency medical plan and reporting of reportable incidents and conditions.

The home does not have documentation that direct care staff person C, hired 7/10/18, received orientation within 40 scheduled working hours that included emergency medical plan and reporting of reportable incidents and conditions.

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

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See Page 5A of 5

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65 (i)

- 1) Staff members A and B are no longer employed at the facility.  
Staff person C has received orientation courses, including the emergency medical plan and reporting of reportable incidents and condition, by the Administrative Services Coordinator.  
Attachment: Revised General Orientation Checklist
- 2) The Orientation Checklist has been updated on 7/26/2018 to include all required orientation courses, including the emergency medical plan and reporting of reportable incidents and conditions.  
Attachment: Revised General Orientation Checklist
- 3) All employee files have been audited by the Administrative Services Coordinator or designee to ensure compliance with regulation 65 (i), including required orientation courses within 40 hours scheduled hours.  
8/10/2018
- 4) The Executive Director or designee will review all new employee Orientation Checklist to ensure compliance with regulation 65 (i).  
12/21/2018 and on-going

*Kristin Kahler* 12-20-18  
Kristin Kahler, Executive Director

12/24/18 *[Signature]*