



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

NOV 29 2018

Mr. Donald E. Feltman,  
President and Chief Executive Officer  
Artis Senior Living of Lemoyne, LLC  
650 American Avenue, Suite 101  
King of Prussia, Pennsylvania 19406

RE: Artis Senior Living of West Shore  
150 North 12<sup>th</sup> Street  
Lemoyne, Pennsylvania 17043  
License #: 333700

Dear Mr. Feltman,

As a result of the Department's Bureau of Human Services Licensing's annual licensing inspection on November 7, 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.

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](https://www.surveymonkey.com/r/BHSL_Inspection).

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

Enclosure  
License Inspection Summary



Violation Report: 33370 - 11/07/2018 - Springs, Israel  
 PCH Name: ARTIS SENIOR LIVING OF WEST SHORE

**1. REGULATION 55 Pa.Code §2600**  
 2600.227(g) - Individuals who participate in the development of the support plan shall sign and date the support plan.

**2a. DESCRIPTION OF VIOLATION**  
 The support plan for Resident #1, completed 8/5/18, did not contain the resident's signature, or document the resident's refusal or inability to sign.  
 The support plan for Resident #2, completed 10/2/18, did not document the date the resident signed the document.

**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 attachment #1 on page 2A

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Beth Bond, Executive Director</i>	Date <i>11/20/2018</i>
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of <u>11/20/18</u> (Date)	Plan of correction implementation status as of <u>11/20/18</u> (Date)
The above plan of correction was approved by <u>BAS</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

Arits Senior Living West Shore  
 2600.227 (g)  
 11/20/2018  
 333700  
 Attachment #1

**Regulation 55Pa. Code 2600.227 (g)**

Individuals who participate in the development of the support plan shall sign and date the support plan.

**Description of Violation**

The support plan for Resident #1, completed 8/5/2018, did not contain the resident's signature, or document the resident refusal or inability to sign.

The support plan for Resident #2, completed 10/2/18, did not document the date the resident signed the document.

**Plan of Correction**

\*Please see attached

Regulation 55PA Code 2600	Target date by which correction will be completed	Plan of Correction
227 (g)	11/08/2018  11/20/2018  2/20/2019  2/20/2019	R1 and R2 support plan were unable to be corrected.  Education provided to Director of Health and Wellness, Coordinators of Health and Wellness, Director of Partnership Development regarding 2600.227 (g) support plan must contain the resident's signature or documentation of the resident's inability to sign.  ED/DHW will conduct audits on supports plans to ensure compliance. Any issue noted will be addressed as appropriate.  The results of the audits will be discussed and evaluated (for up to three months) by the Executive Director and Quality Management Committee to ensure it is still effective. If not effective it will be amended and a new POC will be implemented and monitored to ensure violation does not occur again.

Violation Report: 33370 - 11/07/2018 - Springs, Israel  
 PCH Name: ARTIS SENIOR LIVING OF WEST SHORE

**1. REGULATION 55 Pa.Code §2600**  
 2600.233(c) - If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

**2a. DESCRIPTION OF VIOLATION**  
 The directions (codes) for operating the home's locking mechanism are not conspicuously posted near the courtyard gates.

**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 attachment #2 on page 3A

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Beth Bond, Executive Director</i>	Date <i>11/20/2018</i>
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Artis Senior Living West Shore  
 2600. 233 (c)  
 11/20/2018  
 3337000  
 Attachment #2

**Regulation 55Pa.Code 2600**

2600.233 (c) –If Key-locking devices, electronic system or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near device.

**Description of Violation**

The directions (codes) for operating the home’s locking mechanism are not conspicuously posted near the courtyard gates.

**Plan of Correction**

Regulation 55PA Code 2600	Target date by which correction will be completed	Plan of Correction
233 (c)	11/07/2018	The directions (code) for operating the locking mechanism were conspicuously posted near the courtyard gates at time of survey 11/07/2018.
	11/08/2018	Educated associates regarding 2600.233(c) regarding posting of directions near courtyard gates.
	2/20/2019	ED/Director of Environmental Services will conduct audits monthly to ensure directions are posted near courtyard gates. Any issues noted will be addressed as appropriate.
	2/20/2019	The results of the audits will be discussed and evaluated (for up to 3 months) by the Executive Director and Quality Management Committee to ensure it is still effective. If not effective it will be amended and a new POC will be implemented and monitored to ensure violation does not occur again.