



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to **KJ BETHEL PARK LLC**
LEGAL ENTITY

To operate **THE SHERIDAN AT BETHEL PARK**
NAME OF FACILITY OR AGENCY

Located at **2000 COOL SPRINGS DRIVE, PITTSBURGH, PA 15234**
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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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 **147**
(MAXIMUM CAPACITY)
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller
Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 40

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 **December 3, 2018** until **June 3, 2019**,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **449481**

Robert E. Robinson
ISSUING OFFICER

Carolyn K. Ellison
DEPUTY SECRETARY

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.

HS 628 - 2/18cse



pennsylvania
DEPARTMENT OF HUMAN SERVICES

DEC 04 2018

Ms. Dana Wright
Executive Director
KJ Bethel Park LLC
30 West Monroe Street, Suite 1700
Chicago, Illinois 60603

RE: The Sheridan at Bethel Park
2000 Cool Springs Drive
Bethel Park, Pennsylvania 15234
Certificate #: 449481

Dear Ms. Wright:

As a result of the Department's Bureau of Human Services Licensing inspection on November 16, 2018, of the above facility, we have found that your facility is in substantial compliance with the regulations, set forth in 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because the home is new and not yet serving four or more residents.

In accordance with 55 Pa.Code § 2600.11(b) (relating to procedural requirements for licensure or approval of personal care homes a re-inspection of your newly licensed facility will be conducted within 3 months of the effective date of this license. Complete compliance with all applicable regulations is required in order to maintain your license.

During the inspection, violations on the enclosed License Inspection Summary were found. All violations specified on the 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.

Your PROVISIONAL license is enclosed, based on substantial but not complete compliance with 55 Pa.Code Ch. 2600.

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

Ms. Dana Wright

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 applicant responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Rowe' with a stylized flourish at the end.

Jacqueline L. Rowe
Director

Enclosures

License

License Inspection Summary

Violation Report: 44948 - 11/16/2018 - Garrigan, Laurie
PCH Name: THE SHERIDAN AT BETHEL PARK

Western Region Field Office
Bureau of Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.42(e) - A resident shall have access to a telephone in the home to make calls in privacy. Nontoll calls shall be without charge to the resident.

2a. DESCRIPTION OF VIOLATION

There is no telephone accessible to residents to make/receive telephone calls in private.

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.

A telephone has been placed in the Hospitality Suite. The Residents will have access to make telephone calls in private, if needed.

Please see attachment A and B

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Dana Wright*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Dana Wright, Executive Director* Date *11-28-18*

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

The above plan of correction is approved as of 11/28/18
(Date)

The above plan of correction was approved by *DW*
(Initials)

Plan of correction implementation status as of 11/28/18
(Date)

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

Violation Report: 44948 - 11/16/2018 - Garrigan, Laurie
PCH Name: THE SHERIDAN AT BETHEL PARK

Western Region Field Office
Bureau of Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.89(a) - The home must have hot and cold water under pressure in each bathroom, kitchen and laundry area to accommodate the needs of the residents in the home.

2a. DESCRIPTION OF VIOLATION

At 11:15 a.m., there was no hot or cold water under pressure in the 3rd floor common staff bathroom, across from bedroom #307.

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.

Plumbers were in the Community installing mixing valves in the common area bathrooms. The valves have been installed.

Please see attachment C

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

Signature of Legal Entity Representative (Required on EVERY Page) *Dana Wright*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Dana Wright, Executive Director* Date *11-28-18*

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The above plan of correction is approved as of 11/28/18
(Date)

The above plan of correction was approved by *LN*
(Initials)

Plan of correction implementation status as of 11/28/18
(Date)

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

Violation Report: 44948 - 11/16/2018 - Garrigan, Laurie
 PCH Name: THE SHERIDAN AT BETHEL PARK
 Western Region Field Office
 Bureau of Human Services Licensing

1. REGULATION 55 Pa.Code §2600
 2600.91 - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

2a. DESCRIPTION OF VIOLATION
 No emergency service numbers were posted on or near the telephone in the home's salon.

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.

The emergency numbers have been placed on the Salon phone.
 It is secured with a metal ring.

The common area phones will be monitored weekly by the housekeeping department. If needed, they will be replaced.

Please see attachments D and E

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Dana Wright, Executive Director</i>	Date <i>11-28-18</i>
--	----------------------

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 (Initials)

Plan of correction implementation status as of 11/28/18
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- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 44948 - 11/16/2018 - Garrigan, Laurie
 PCH Name: THE SHERIDAN AT BETHEL PARK

1. REGULATION 55 Pa.Code §2600
 2600.125(a) - Combustible and flammable materials may not be located near heat sources or hot water heaters.

2a. DESCRIPTION OF VIOLATION
 At 10:20 a.m., the following items were located near heat sources in the home's boiler room:
 * 2 cardboard boxes were stacked behind the hot water tank
 * Approximately 20 blue print drawings were stacked on the floor behind boiler #380874 B

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 11/28/2018
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 Bureau of Human Services Licensing

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.

The boxes and blueprints were being used by the plumbers at the time. The boxes and blueprints have been removed from the mechanical room.

The Maintenance Director will monitor the mechanical room after a sub-contractor has been in doing either routine maintenance or repairs.

Immediately: A designated staff person shall monitor all heat sources and hot water heaters weekly to ensure no combustible or flammable materials are near them. *IA*

Please see attachments F and G

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Signature of Legal Entity Representative
 (Required on EVERY Page) *Dana Wright*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Dana Wright, Executive Director* Date *11-28-18*

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Plan of correction implementation status as of 11/28/18
 (Date)

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 Partially Implemented - Adequate Progress *IA*
 Partially Implemented - Inadequate Progress
 Not Implemented

Violation Report: 44948 - 11/16/2018 - Garrigan, Laurie
PCH Name: THE SHERIDAN AT BETHEL PARK

Western Region Field Office
Bureau of Human Services Licensing

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 for operating the home's locking mechanisms at the 1st and 2nd floor entrance doors to the secured dementia care units are not conspicuously posted.

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.

A directional posting has been placed on the wall entering and exiting the Memory Care units. It is permanently affixed to the wall and will not be removed.

Please see attachments H

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

Signature of Legal Entity Representative (Required on EVERY Page) *Dana Wright*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *DANA WRIGHT, Executive Director* Date *11.28.18*

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(Date)

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(Initials)

Plan of correction implementation status as of 11/28/18
(Date)

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- Partially Implemented - Inadequate Progress
- Not Implemented