



January 13, 2020

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 annual inspection on July 17, 2019, of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report 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.

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,

Kevin Hancock
Deputy Secretary
Office of Long Term Living

Enclosure
Violation Report

Violation Report

Facility Information

Name: ARDEN COURTS OF JEFFERSON HILLS

License Number: 43551

Address: 380 WRAY LARGE ROAD, JEFFERSON HILLS, PA 15025

County: ALLEGHENY

Region: WESTERN

Administrator

Name: KRISTIN KAHLER

Phone: 4123840300

Email: kritin.kahler@hcr-manorcare.com

Legal Entity

Name: ARDEN COURTS OF JEFFERSON HILLS PA LLC

Address: 333 NORTH SUMMIT STREET, TOLEDO, OH, 43604

Certificate(s) of Occupancy

Type: C-2 LP

Date: 07/02/1999

Issued By: Labor & Industry

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 114

Waking Staff: 86

Inspection

Type: Full

BHA Docket #:

Notice: Unannounced

Reason: Renewal

Inspection Dates and Department Representative

07/17/2019 - On-Site: Cindy Mulick, Amy Duncan, Josh Hoover

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 60

Residents Served: 57

Secured Dementia Care Unit

In Home: Yes

Area: HOME

Capacity: 60

Residents Served: 57

Hospice

Current Residents: 11

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 55

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 57

Have Physical Disability: 0

5a1 - DHS Access

Regulations

2600.

5.a. The administrator or a designee shall provide, upon request, immediate access to the home, the residents and records to:

- 1. Agents of the Department.

Description of Violation

At 10:00 a.m., an Agent of the Department, requested access to 7 resident records.

At 10:45 a.m., 5 partial records were provided.

At 11:15 a.m., an Agent of the Department requested Resident #1's, #2's and #3's complete resident record.

At 11:50 a.m., resident records, containing all required information, for all 7 residents were provided to the Agent of the Department.

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 page 2A

Legal Entity Representative

Kristin Kahler

Signature

Kristin Kahler, Executive Dir. 10/18/19

Printed Name and Title

Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of

12/16/19
(Date)

Plan of correction implementation status as of

12/16/19
(Date)

The above plan of correction was approved by

BS
(Initials)

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

Arden Courts of Jefferson Hills

License #435510

Regulation 2600.5.a

All managers of the facility will be inserviced by the Executive Director on Regulation 2600.5.a and the need to provide immediate access for Agents of the Department to the home, residents and records.

This inservice will be completed by December 1, 2019.

Immediately end ongoing - The administrator will implement procedures to ensure that
On future visits the staff will provide immediate access to Agents of the Department to the home, residents and records.

BB 12/16/19

Kristin Kahler

Kristin Kahler, Executive Dir. 10/18/19

17 - Record Confidentiality

Regulations

2/00.

17. Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

Description of Violation

At 10:49 a.m., an individual service notes binder, containing behavioral care needs information for residents #4, #5 and #6, was unlocked, unattended, and accessible on a desk in the kitchen area of the Country Lane section of the home.

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 page 3A

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Signature

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Arden Courts of Jefferson Hills

#433510

Regulation 2600.17

This binder was immediately placed in a locked area.

All staff will be inserviced by the Executive Director or designee on Regulation 2600.17 and Record Confidentiality. Staff will be educated on the requirement to keep resident records locked, attended and inaccessible. This inservice will be completed by December 1, 2019.

The Executive Director or designee will conduct rounds daily on all 3 shifts for 14 days following the completion of the inservice to monitor for compliance of the regulation. Rounds will then occur weekly on all three shifts for one month to monitor compliance of the regulation. These rounds will monitor that resident information is locked up appropriately. Any issues found will be documented in the comments section of the audit tool. The results of these rounds will be reviewed by the management team at their morning meeting to monitor for compliance.

Kristin Kahler

Kristin Kahler, Exec. Dir.

10-18-19.

64c - Annual Training

Regulations

2600.

64.c. An administrator shall have at least 24 hours of annual training relating to the job duties. The Department-approved administrator training course specified in subsection (a) fulfills the annual training requirement for the first year.

Description of Violation

During the 2018 training year, 19 of the 24 annual administrator training hours completed by staff person A, the administrator, were completed online. The maximum number of annual administrator training hours that can be completed online is 12.

Plan of Correction (POC)

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Arden Courts of Jefferson Hills

#435510

Regulation 2600.64.c

Seven of the annual administrator credits done in person for 2019 will be applied to the 2018 training year. This will include:

6 hours of instruction on May 7, 2019 for the 2019 Alzheimer's Association Annual Spring Conference: Partners in Progress

1 hour on instruction on May 9, 2019 for CPR, AED, and Basic First Aid Certification

For the 2019 training year, the administrator has completed:

1 additional hour on May 9, 2019 for CPR, AED and Basic First Aid Certification

4 hours of instruction on October 15, 2019 for the course How to Live Longer and Better: Just Keep Moving offered by UPMC Senior Services.

7 hours of instruction will be completed on October 24, 2019 for the course Alzheimer's Disease and Dementia Care.

This will satisfy the requirement for 2019 training year for hours completed in-person and not online trainings. Executive Director will comply with Regulation 2600.64.c for 2020 and the future.

Kristin Kahlen Kristin Kahlen Exec. Dir. 10/18/19

By 12/31/19 - The administrator will complete a total of 31 hours of Department approved training with no more than 12 hours of online training to make up for the hours not received in 2018.

BB 12/16/19

82c - Locking Poisonous Materials

Regulations

2600.

82.c. Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

Description of Violation

At 11:20 a.m., a tube of Colgate Clean Mint toothpaste, with a manufacturer's label indicating "if accidentally swallowed get medical help or contact poison control right away" was on the sink in resident #3's bathroom.

At 11:28 a.m., a container of Sparkle Mouth Wash with a manufacturer's label indicating "in case of accidental ingestion seek professional help or contact poison control immediately" was on the sink in resident #7's bathroom.

Not all residents of the home, including residents #1, #3 and #7, have been assessed capable of using or safely avoiding poisonous materials.

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 page 6A

Legal Entity Representative

Kristin Kahler
Signature

Kristin Kahler Exea. Dir.
Printed Name and Title

10/18/19
Date

82c - Locking Poisonous Materials (continued)

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Arden Courts of Jefferson Hills

License #425510

Regulation 2600.82.c

The items were removed from the residents' rooms immediately.

All staff will be inserviced on Regulation 2600.82.c and the requirement for locking poisonous materials. This will be completed by the Executive Director or designee by December 1, 2019.

The Executive Director or designee will conduct rounds daily on all 3 shifts for 14 days following the completion of the inservice to monitor for compliance of the regulation. Rounds will then occur weekly on all three shifts for one month. The results of these rounds will be reviewed by the managers at morning meeting to monitor for compliance of the regulation.

Kristin Kahler Kristin Kahler, Exec. Dir. 10/18/19

101j7 - Lighting/Operable Lamp

Regulations

2600.

101j. Each resident shall have the following in the bedroom:

7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

At 11:40 am, resident #8's bedside light was inoperable.

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 page 7A

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Arden Courts of Jefferson Hills

License #435510

Regulation 2600.101.j

Resident #8's light was fixed immediately.

All staff will be inserviced on Regulation 2600.101.j and the requirement for an operable light at the resident's bedside. This will be completed by the Executive Director or designee by December 1, 2019

The Executive Director or designee will conduct rounds daily on all 3 shifts for 14 days following the completion of the inservice to monitor for compliance of the regulation. Rounds will then occur weekly on all three shifts for one month. The results of these rounds will be reviewed by the managers at morning meeting to monitor for compliance of the regulation.

 Kristin Kahler, Exec. Dir. 10/18/19.

183b - Meds and Syringes Locked

Regulations

2600.

183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

Description of Violation

At 10:32 a.m., Remed Phytoplex Anti-Fungal powder and Soothe and Cool Inzo Barrier Cream, was stored in resident #7's unlocked nightstand drawer.

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.)

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Arden Courts of Jefferson Hills

License #435510

Regulation 2600.183.b

The items were removed from Resident #7's room immediately.

All staff will be inserviced on Regulation 2600.183.b and the requirement for locking of all medications. This will be completed by the Executive Director or designee by December 1, 2019.

The Executive Director or designee will conduct rounds daily on all 3 shifts for 14 days following the completion of the inservice to monitor for compliance of the regulation. Rounds will then occur weekly on all three shifts for one month. The results of these rounds will be reviewed by the managers at morning meeting to monitor for compliance of the regulation.

Kristin Kahler Kristin Kahler, Exec. Dir. 10/18/19.

234a - Admission Support Plan

Regulations

2600.

234.a. Within 72 hours of the admission, or within 72 hours prior to the resident's admission to the secured dementia care unit, a support plan shall be developed, implemented and documented in the resident record.

Description of Violation

Resident #1's support plan, dated 12/22/18, is incomplete in the following areas:

- there is no plan to meet the medical need for several diagnoses including syncope and collapse, history of falling, cerebral infarction and generalized muscle weakness
- nothing is entered for the resident's hobbies and interests
- the support plan is not signed or dated by the person who completed it

Plan of Correction (POC)

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Signature

Kristin Kahler, Exec. Dir. *10/18/19*
Printed Name and Title Date

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Arden Courts of Jefferson Hills

License #435510

Regulation 2600.234.a

Resident #1's support plan was completed on 7/18/2019.

All nurses will be inserviced by the Executive Director on Regulation 234.a and the need for the service plan to be completed within 72 hours of admission.

All residents admitted within one year prior to 7/17/2019 will be audited for the initial support plan being completed within the 72 hours following admission.

All new residents being admitted will have a support plan completed within 72 hours of admission. All new resident files will be audited by the Executive Director or designee to ensure compliance with the 72 hour requirement for the support plan to be completed. Audits will be reviewed by the managers at the morning meeting to monitor compliance.

~~Kristin~~ Kahler Kristin Kahler, Exec. Dir. 10/18/19.