



November 13, 2019

Ms. Joan L. Ealy
Executive Director
Arden Courts North Hills of Pittsburgh PA, LLC
ATTN: LICENSURE SUPPORT
333 North Summit Street
Toledo, Ohio 43604

RE: Arden Courts of North Hills
1125 Perry Highway
Pittsburgh, Pennsylvania 15237
License #: 435530

Dear Ms. Ealy:

As a result of the Department's Bureau of Human Services Licensing annual inspection on August 15, 2019 and August 16, 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,

A handwritten signature in black ink, appearing to read "Kevin Hancock", written over a white background.

Kevin Hancock
Deputy Secretary
Office of Long Term Living

Enclosure
Violation Report

Violation Report

Facility Information

Name: *ARDEN COURTS OF NORTH HILLS*
Address: *1125 PERRY HIGHWAY,, PITTSBURGH, PA 15237*
County: *ALLEGHENY* Region: *WESTERN*

License Number: *43553*

Administrator

Name: *Joan Ealy* Phone: *4123697887*

Email:
*LICENSURE-CERTIFICATION@HCR-
MANORCARE.COM*

Legal Entity

Name: *ARDEN COURTS NORTH HILLS OF PITTSBURGH PA LLC*
Address: *333 NORTH SUMMIT STREET, TOLEDO, OH, 43604*

RECEIVED

10/10/2019

Western Region Field Office
Bureau of Human Services Licensing

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *11/12/1996*

Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *106*

Waking Staff: *80*

Inspection

Type: *Full* BHA Docket #:
Reason: *Renewal*

Notice: *Unannounced*

Inspection Dates and Department Representative

08/15/2019 - On-Site: Michael Marini, Courtney Barry
08/16/2019 - On-Site: Michael Marini

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *56*

Residents Served: *53*

Secured Dementia Care Unit

In Home: *Yes* Area: *Entire Building*

Capacity: *56*

Residents Served: *53*

Hospice

Current Residents: *27*

Number of Residents Who:

Receive Supplemental Security Income: *0*

Are 60 Years of Age or Older: *52*

Diagnosed with Mental Illness: *0*

Diagnosed with Intellectual Disability: *0*

Have Mobility Need: *53*

Have Physical Disability: *0*

ARDEN COURTS OF NORTH HILLS

43553

25a - Written Contract and Review

Regulations

2600.

25.a. Prior to admission, or within 24 hours after admission, a written resident-home contract between the resident and the home shall be in place. The administrator or a designee shall complete this contract and review and explain its contents to the resident and the resident's designated person if any, prior to signature.

Description of Violation

Resident #1, resident #2, resident #3, resident #4 and resident #5 did not sign their resident-home contracts.

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 8

Legal Entity Representative

Joan L. Early
Signature

JOAN L. Early, EXECUTIVE DIRECTOR 10-7-19
Printed Name and Title Date

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

The above plan of correction is approved as of 10/11/19
(Date)

Plan of correction implementation status as of 10/11/19
(Date)

The above plan of correction was approved by JM
(Initials)

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

Regulation 2600.25.a

The contracts for residents #1, #3, #4, and #5 have been signed by the respective residents.
(Attachments – Signed contracts for residents #1, #3, #4, and #5 with signatures. Resident #2 has passed away)

An audit of all resident charts will be conducted by the Executive Director or designee by 10/31/19 to ensure all contracts have resident signatures.

Contracts will be audited by the Executive Director or designee upon move-in to ensure required resident signatures are completed.
10/2/19 and on-going
(Attachment – resident file audit form)

The coordinators were in-serviced on 10/2/19, regarding regulation 25 (b) re. required resident contract signature by the Executive Director.
(Attachment – In-Service Attendance Record)

Jan Ealey 10-8-19
ARDEN COURTS OF NORTH HILLS

LICENSE # 43553

ARDEN COURTS OF NORTH HILLS

43553

41e - Signed Statement

Regulations

2600.

41.e. A statement signed by the resident and, if applicable, the resident's designated person acknowledging receipt of a copy of the information specified in subsection (d), or documentation of efforts made to obtain signature, shall be kept in the resident's record.

Description of Violation

Resident #1, resident #2, resident #3, resident #4 and resident #5 did not sign a statement acknowledging receipt of a copy of the resident rights and complaint procedures.

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 3A of 8.

Legal Entity Representative

[Handwritten Signature]
Signature

JOAN L. Ealey EXECUTIVE DIRECTOR 10-7-19
Printed Name and Title Date

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

The above plan of correction is approved as of 10/11/19
(Date)

Plan of correction implementation status as of 10/11/19
(Date)

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

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

Regulation 2600.41.e

The statement acknowledging receipt of a copy of the resident rights and complaint procedures for residents #1, #3, #4, and #5 have been signed by the respective residents.
(Attachments – Signed acknowledgement of the receipt of resident rights and complaint procedures for residents #1, #3, #4, and #5. Resident #2 has passed away)

An audit of all resident charts will be conducted by the Executive Director or designee by 10/31/19 to ensure all receipt of acknowledgment of the resident rights and complaint procedures have resident signatures.

Acknowledgement of the resident rights and complaint procedures will be audited by the Executive Director or designee upon move-in to ensure required resident signature are completed.
10/31/19 and on-going
(Attachment – resident file audit form)

The coordinators were in-serviced on 10/2/19, regarding regulation 41 (e) re. required acknowledgement of the resident rights and complaint procedures signature by the resident, by the Executive Director.
(Attachment – In-Service Attendance Record)

Josh Coyle 10-8-19
ARDEN COURTS OF NORTH HILLS

LICENSE # 43553

ARDEN COURTS OF NORTH HILLS

43553

101r - Bedroom - shades/drapes/window covering

Regulations

2600.

101.r. There must be drapes, shades, curtains, blinds or shutters on the bedroom windows. Window coverings must be clean, in good repair, provide privacy and cover the entire window when drawn.

Description of Violation

On 8-15-19, the pull shade in bedroom #52B was broken and does not provide privacy on the window.

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 4A of 8

Legal Entity Representative

Joan L. Ealey
Signature

JOAN L. EALEY EXECUTIVE DIRECTOR 10-7-19
Printed Name and Title Date

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The above plan of correction is approved as of 10/11/19
(Date)

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

Plan of correction implementation status as of 10/11/19
(Date)

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

2600.101.r.

This pull shade in bedroom #52B was fixed immediately by the Building Service Coordinator.
(Attachment – Photos of pull shade in up and down positions)

All resident rooms have been audited by the Executive Director or designee on 10/5/19 to ensure compliance with regulation 101 (r) re. window coverings.

The coordinators were in-serviced on 10/2/19, regarding regulation 101 (r) re. window covering requirements, by the Executive Director.
(Attachment – In-Service Attendance Record)

Window coverings (windows, shades, valances) will be checked by the housekeeper during Resident Room Deep Cleaning procedures.
(Attachment – Resident Room Deep Cleaning Checklist)
10/5/19 and on-going

The Building Services Coordinator and housekeepers were in-serviced on 10/2/19, regarding regulation 101 (r) re. window covering requirements, by the Executive Director.
(Attachment – In-Service Attendance Record)

Justealy 10-8-19
ARDEN COURTS OF NORTH HILLS

LICENSE# 43553

ARDEN COURTS OF NORTH HILLS

43553

132i - Testing Fire Alarm

Regulations

2600.

132.i. A fire alarm or smoke detector shall be set off during each fire drill.

Description of Violation

According to the home's fire drill records, the the fire alarm/smoke detector was not set off during the fire drill held on 12-7-18 at 11:35 PM.

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 5A of 8

Legal Entity Representative

[Handwritten Signature]
Signature

JOAN L. Ealy EXECUTIVE DIRECTOR *10-7-19*
Printed Name and Title Date

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(Date)

Plan of correction implementation status as of 10/11/19
(Date)

The above plan of correction was approved by JE
(Initials)

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

2600.132.i.

A fire alarm or smoke detector will be set off during each fire drill.
(Attachment – fire drill records – 2019).

Fire drill records will be reviewed at monthly Safety Committee meeting to ensure compliance with regulation 132 (i).
10/2/19 and on-going

The Building Service Coordinator was in-service on date 10/2/19 by the Executive Director, regarding regulation 132 (i) to ensure fire safety and alarms standards have been followed.
(Attachment – In-Service Attendance Record)

John Early 10-8-19
ARDEN COURTS OF NORTH HILLS

LICENSE # 43553

ARDEN COURTS OF NORTH HILLS

43553

184a - Labeling OTC/CAM

Regulations

2600.

184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

- 4. The prescribed dosage and instructions for administration.

Description of Violation

Resident #6 is prescribed Depakote 125 mg-Take 6 tablets (750 mg) by mouth twice daily; however, the pharmacy label indicates Depakote 125 mg-Take 5 tablets (625 mg) by mouth twice daily.

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 6A of 8

Legal Entity Representative

[Handwritten Signature]
Signature

JOAN L. Ealey EXECUTIVE DIRECTOR *10-7-19*
Printed Name and Title Date

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The above plan of correction is approved as of 10/11/19
(Date)

Plan of correction implementation status as of 10/11/19
(Date)

The above plan of correction was approved by JE
(Initials)

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

2600.184.a.

A change of dosage sticker was placed immediately on resident #6's Depakote's container.
(Attachment – picture of Depakote)

An audit of all resident's medications was conducted by the Resident Services Coordinator on 8/15/19 to ensure compliance with regulation 184 (a).

A weekly audit of all resident medications will be conducted by the Resident Services Coordinator or designee to ensure compliance with regulation 184 (a).

8/22/19 and on-going

(Attachment – Medication Cart Audit)

The Resident Services Supervisors and Coordinator were in-serviced on 10/2/19 by the Executive Director, regarding regulation 184 (a).

(Attachment – In-Service Attendance Record)

Jan Ealy 10-8-19
ARDEN COURTS OF NORTH HILLS

LICENSE# 43553

ARDEN COURTS OF NORTH HILLS

43553

187a - Medication Record

Regulations

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

12. Diagnosis or purpose for the medication, including pro re nata (PRN).

Description of Violation

Resident #5's August 2019 medication administration record does not include a diagnosis or purpose for Tresiba-Inject 28 units subcutaneously at bedtime.

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 7A of 8

Legal Entity Representative

Joan L. Ealy
Signature

JOAN L. EALY EXECUTIVE DIRECTOR 10-7-19
Printed Name and Title Date

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The above plan of correction is approved as of 10/11/19
(Date)

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

Plan of correction implementation status as of 10/11/19
(Date)

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

2600.187.a.

The diagnosis was added immediately to Resident #5's medication administration record (Tresiba).
(Attachment – Medication administration record)

An audit of all resident's medication administration records was conducted by the Resident Services Coordinator or designee on 8/15/19 to ensure compliance with regulation 187 (a).

A weekly audit of all resident medication administration records will be conducted by the Resident Services Coordinator or designee to ensure compliance with regulation 187 (a).
8/22/19 and on-going
(Attachment – Medication Cart Audit)

The Resident Services Supervisors and Coordinator were in-serviced on 10/2/19 by the Executive Director, regarding regulation 187 (a).
(Attachment – In-Service Attendance Record)

Joan Early 10-8-19
ARDEN COURTS OF NORTH HILLS

LICENSE # 43553

ARDEN COURTS OF NORTH HILLS

43553

191 - Resident Right to Refuse

Regulations

2600.

191. Resident Education - The home shall educate the resident of the right to question or refuse a medication if the resident believes there may be a medication error. Documentation of this resident education shall be kept.

Description of Violation

Resident #1, resident #2, resident #3, resident #4 and resident #5 were not educated on their right to question or refuse a medication if they believe there may be a medication error.

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 8A of 8

Legal Entity Representative

[Handwritten Signature]
Signature

JOAN L Ealy EXECUTIVE DIRECTOR 10-7-19
Printed Name and Title Date

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The above plan of correction is approved as of 10/11/19
(Date)

Plan of correction implementation status as of 10/11/19
(Date)

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

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

Regulation 2600.191

Residents #1, #3, #4, and #5 have been educated on their right to question or refuse a medication if they believe there may be a medication error.

(Attachments – Education on their right to question or refuse a medication if they believe there may be a medication error - Residents #1, #2, #3, #4, and #5 with signatures. Resident #2 has passed away)

An audit of all resident charts will be conducted by the Executive Director or designee by 10/31/19 to ensure residents were educated on their right to question or refuse a medication if they believe there may be a medication error (as noted by resident's signature).

Charts will be audited by the Executive Director or designee upon move-in to ensure residents were educated on their right to question or refuse a medication if they believe there may be a medication error (as noted by resident's signature).

10/2/19 and on-going

(Attachment – resident file audit form)

The coordinators were in-serviced on 10/2/19, regarding regulation 191 re. residents were educated on their right to question or refuse a medication if they believe there may be a medication error (as noted by resident's signature) by the Executive Director.

(Attachment – In-Service Attendance Record)

Jan Early 10-8-19
ARDEN COURTS OF NORTH HILLS

LICENSE # 43563