

Department of Human Services
Bureau of Human Service Licensing

March 19, 2021

██████████ EXECUTIVE DIRECTOR
ARDEN COURTS OF JEFFERSON HILLS PA LLC
333 NORTH SUMMIT STREET
TOLEDO, OH 43604

RE: ARDEN COURTS OF JEFFERSON
HILLS
380 WRAY LARGE ROAD
JEFFERSON HILLS, PA, 15025
LICENSE/COC#: 43551

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/22/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Jody Garvey

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC**

Facility Information

Name: ARDEN COURTS OF JEFFERSON HILLS **License #:** 43551 **License Expiration Date:** 01/25/2022
Address: 380 WRAY LARGE ROAD, JEFFERSON HILLS, PA 15025
County: ALLEGHENY **Region:** WESTERN

Administrator

Name: [REDACTED] **Phone:** 4123840300 **Email:** [REDACTED]

Legal Entity

Name: ARDEN COURTS OF JEFFERSON HILLS PA LLC
Address: 333 NORTH SUMMIT STREET, TOLEDO, OH, 43604
Phone: 4123840300 **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 07/02/1999 **Issued By:** Labor and Industry

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 112 **Waking Staff:** 84

Inspection

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident **Exit Conference Date:** 12/22/2020

Inspection Dates and Department Representative

12/22/2020 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 60 **Residents Served:** 56

Secured Dementia Care Unit

In Home: Yes **Area:** Entire Home **Capacity:** 60 **Residents Served:** 56

Hospice

Current Residents: 14

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: 56 **Have Physical Disability:** 0

Inspections / Reviews

12/22/2020 - Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 01/15/2021

Inspections / Reviews (*continued*)

1/25/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow Up Type: *POC Submission*Follow-Up Date: *01/29/2021*

2/1/2021 POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *02/15/2021*

3/19/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

15a - Resident Abuse Report

1. Requirements

2600.

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

Description of Violation

On 12/9/20, another staff member reported witnessing staff person A pushing resident #1's head back and calling ■■■ a "mother fucker" because ■■■ became combative during a COVID-19 test on 12/2/20. However, the allegation of abuse was not reported to the local Agency Area on Aging until 12/10/20 at 5:00 PM.

Plan of Correction

Accept

The incident was reported to the Area Agency on Aging on 12/10/2020. The staff member that reported the abuse was verbally counseled on 12/9/2020 by the Executive Director and the Resident Services Coordinator and was required to complete training on abuse, neglect and mistreatment of residents on 1/28/2021. All staff will be inserviced on 2600.15.a regarding requirements of reporting abuse and the Older Adult Protective Services Act by the Executive Director or designee by 2/15/2021. All allegations of abuse will be reviewed by the coordinator team at the daily morning meeting to monitor for compliance with immediate reporting.

Completion Date: 02/15/2021

Document Submission

Implemented

All staff were inserviced on 2600.15a regarding requirements of reporting abuse and the Older Adult Protective Services Act. Sign in sheet for training attached.

15d - Resident Abuse-Notification

1. Requirements

2600.

- 15.d. The home shall immediately notify the resident and the resident's designated person of a report of suspected abuse or neglect involving the resident.

Description of Repeat Violation

On 12/9/20, another staff member reported witnessing staff person A pushing resident #1's head back and calling ■■■ a "mother fucker" because ■■■ became combative during a COVID-19 test on 12/2/20. However, the allegation of abuse was not immediately reported to the resident's designated person.

Repeat Violation: 11/21/19

Plan of Correction

Accept

The resident's responsible person was notified on 12/10/2020 of the report of abuse. All managers and nursing supervisors will be inserviced by the Executive Director on 2600.15.d and the requirement to report suspected abuse to the responsible party immediately by 2/1/2021. All allegations of abuse will be reviewed by the coordinator team at the daily morning meeting to monitor for compliance with immediate reporting.

Completion Date: 02/01/2021

Document Submission

Implemented

All managers and supervisors were inserviced on regulation 2600.15d. Sign in sheet for inservice attached.

16c - Written Incident Report

1. Requirements

2600.

- 16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On 12/9/20, another staff member reported witnessing staff person A pushing resident #1's head back and calling ■■■ a "mother fucker" because ■■■ became combative during a COVID-19 test on 12/2/20. However, the allegation of abuse was not reported to the Department until 12/10/20 at 5:23 PM.

Plan of Correction**Accept**

The incident was reported to the Department on 12/10/2020. The staff member that reported the abuse was verbally counseled on 12/9/2020 by the Executive Director and the Resident Services Coordinator and was required to complete training on abuse, neglect and mistreatment of residents on 1/28/2021. All managers and nursing supervisors will be inserviced on 2600.16.c regarding requirements of written incident reporting/abuse reporting by the Executive Director or designee by 2/1/2021. All allegations of abuse will be reviewed by the coordinator team at the daily morning meeting to monitor for compliance with reporting.

Completion Date: 02/01/2021

Document Submission**Implemented**

All supervisors and managers were inserviced on Regulation 2600.16c regarding incident/abuse reporting. Sign in sheet for inservice attached.