

Department of Human Services
Bureau of Human Service Licensing

July 27, 2021

██████████ PRESIDENT/COO
BENTLEY AID OPCO LLC
2400 GARDEN WAY
HERMITAGE, PA 16148

RE: GARDEN WAY PLACE
2400 GARDEN WAY
HERMITAGE, PA, 16148
LICENSE/COC#: 44492

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/28/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Janine Wenzig

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services
Bureau of Human Service Licensing

June 1, 2021

██████████ PRESIDENT/COO
BENTLEY AID OPCO LLC
2400 GARDEN WAY
HERMITAGE, PA 16148

RE: GARDEN WAY PLACE
2400 GARDEN WAY
HERMITAGE, PA, 16148
LICENSE/COC#: 44492

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 04/28/2021 of the above facility, the citations specified on the enclosed Licensing Inspection Summary (LIS) were found.

We have determined that your plan of correction is: Acceptable

All citations specified on the plan of correction must be corrected by the dates specified on the License Inspection Summary (violation report) and continued compliance with Department statutes and regulations must be maintained.

Sincerely,
Janine Wenzig

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: GARDEN WAY PLACE **Licen e #:** 44492 **Licen e Expiration Date:** 01/11/2022
Addr e : 2400 GARDEN WAY, HERMITAGE, PA 16148
County: MERCER **Region:** WESTERN

Administrator

Name: [REDACTED] **Phone:** 7243471964 **Email:** [REDACTED]

Legal Entity

Name: BENTLEY AID OPCO LLC
Address: 2400 GARDEN WAY, HERMITAGE, PA, 16148
Phone: 7243471964 **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 03/06/1998 **Issued By:** City of Hermitage

Staffing Hours

Re ident Support Staff: 0 **Total Daily Staff:** 37 **Waking Staff:** 28

Inspection

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint **Exit Conference Date:** 04/28/2021

Inspection Dates and Department Representative

04/28/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 47 **Residents Served:** 30

Secured Dementia Care Unit

In Home: No **Area:** **Capacity:** **Residents Served:**

Hospice

Current Residents: NA

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 30
Diagnosed with Mental Illness: 4 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 7 **Have Physical Disability:** 0

Inspections / Reviews

04/28/2021 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 05/28/2021

Inspections / Reviews *(continued)*

6/1/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow Up Type: *Document Submission*

Follow-Up Date: *06/04/2021*

7/27/2021 Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

85a - Sanitary Conditions

1. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

There was a pile of dog feces and leaves measuring approximately 30 inches x 24 inches on the concrete patio, approximately 5-feet from the rear entrance to the courtyard.

Plan of Correction

Accept

Regulation

2600.85.a Sanitation

Sanitary conditions shall be maintained

Description of Violation

There was a pile of dog feces and leaves measuring approximately 30 inches x 24 inches on the concrete patio, Approximately 5-feet from the rear entrance of the courtyard.

Plan of Correction

Submission of this response and Plan of Correction is NOT a legal admission that a deficiency exists or, that this Statement of Deficiencies was correctly cited, and is also NOT to be construed as an admission against interest by the residence, or any employees, agents, or other individuals who drafted or may be discussed in the response of Plan of Correction. In addition, preparation and submission of this Plan of Correction does NOT constitute an admission or agreement of any kind by the facility of the truth of any facts alleged or correctness of any conclusions set forth in this allegation by the survey agency.

- Immediate Action was taken to remove the pile of feces and leaves from the courtyard on 4/28/2021 by Executive Director.
- Initial waste and leaf removal on 4/28/2021, was placed in the building dumpster and A waste receptacle was purchase and identified as "dog waste" and placed near the rear of the courtyard accessible to staff. (see attachment A)
- ED Conducted audit of community grounds on 4/28/2021 to ensure sanitary conditions were maintained with identified areas corrected at time of discovery.
- Current staff were educated on maintain sanitary conditions including proper waste and leaf removal in accordance with regulation 2600.85.a for courtyard on 4/30/2021 By Executive Director. (See Attachment B)
- The Ed And/or Designee will inspect the community to ensure sanitary conditions are maintained weekly for four weeks, biweekly for four weeks, then monthly for one month to be completed on 7/21/2021. The review will be discussed in monthly QI meetings where it will be determined if continued auditing is necessary based on 3 months of compliance. Monitoring will be on going. (See Attachment C)

Completion Date: 07/21/2021

Document Submission

Implemented

Documentation provided