

Department of Human Services
Bureau of Human Service Licensing

October 12, 2021

[REDACTED]
GRANDVIEW ESTATES MEMORY CARE LLC
1151 SCENERY DRIVE
ELIZABETH, PA 15037

RE: GRANDVIEW ESTATES MEMORY
CARE LLC
1151 SCENERY DRIVE
ELIZABETH, PA, 15037
LICENSE/COCC#: 44992

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/21/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Jon Kimberland

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: GRANDVIEW ESTATES MEMORY CARE LLC License #: 44992 License Expiration Date: 08/29/2022
Address: 1151 SCENERY DRIVE, ELIZABETH, PA 15037
County: ALLEGHENY Region: WESTERN

Administrator

Name: [REDACTED] Phone: 4128724856 Email: [REDACTED]

Legal Entity

Name: GRANDVIEW ESTATES MEMORY CARE LLC
Address: 1151 SCENERY DRIVE, ELIZABETH, PA, 15037
Phone: 4124054022 Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 09/07/1994 Issued By: L&I
Type: I-1 Date: 05/30/2019 Issued By: Elizabeth Township

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 30 Waking Staff: 23

Inspection

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Incident Exit Conference Date: 09/21/2021

Inspection Dates and Department Representative

09/21/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 26 Residents Served: 15

Secured Dementia Care Unit

In Home: Yes Area: Entire Home Capacity: 26 Residents Served: 15

Hospice

Current Residents: 10

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 15
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 15 Have Physical Disability: 1

Inspections / Reviews

09/21/2021 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *10/03/2021*

10/8/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *10/11/2021*

10/12/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *10/16/2021*

10/12/2021 - 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

In accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 – 10225.707) and 6 Pa. Code Sections 15.21 – 15.27 (relating to reporting suspected abuse) If there is an allegation of abuse the home shall immediately call the local Area Agency on Aging, complete an Act 13 form and send it to the Area Agency on Aging within 48 hours. However, on [REDACTED], at approximately 6:45 a.m. direct care staff person A, was notified by resident #1 that direct care staff person B allegedly had thrown an exercise band at the resident on the evening of 9/11/21 and the incident was not reported to the Area Agency on Aging until 9/13/21 at 11:28 a.m.

Plan of Correction

Do Not Accept

The staff received a training on the homes Abuse reporting policy which is in line with OAPSA and DHS guidelines. Staff also received a training on OAPSA and DHS reporting.

Completion Date: 09/23/2021

Plan of Correction

Directed

The staff received a training on the homes Abuse reporting policy which is in line with OAPSA and DHS guidelines. Staff also received a training on OAPSA and DHS reporting. This training will be given annually and at orientation, by the administrator.

DIRECTED:

By 10/14/21: The administrator shall audit any allegations of abuse to ensure any allegation of abuse is reported in accordance with regulation 2600.15(a). 10/13/21 [REDACTED]

Completion Date: 10/11/2021

Document Submission

Implemented

See Attached

15b - Supervisor Plan

1. Requirements

2600.

- 15.b. If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

Description of Violation

In accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 – 10225.707) and 6 Pa. Code Sections 15.21 – 15.27 (relating to reporting suspected abuse) If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident. However, direct care staff person B indicates that on 9/12/21 she was approached by direct care staff person A concerning an allegation of abuse involving resident #1. However, direct care staff person B was not suspended immediately or placed on a plan of supervision approved by the Department and worked from 3:00 p.m. to 11:00 p.m. on 9/12/21.

15b - Supervisor Plan (continued)

Plan of Correction **Do Not Accept**

Staff person B was terminated on 9/13/21. The staff received a training on the homes Abuse reporting policy which is in line with OAPSA and DHS regulations. Staff also received a training on OAPSA and DHS reporting and the process that goes with it.

Completion Date: 09/23/2021

Plan of Correction **Directed**

Staff person B was terminated on 9/13/21. The staff received a training on the homes Abuse reporting policy which is in line with OAPSA and DHS regulations. Staff also received a training on OAPSA and DHS reporting and the process that goes with it. This training will be given annually and at orientation, by the administrator.

DIRECTED:

By 10/14/21: The administrator shall audit any allegations of abuse to ensure when any staff person is alleged of abuse, the staff person is immediately suspended or placed on a plan of supervision approved by the Department. 10/13/21

Completion Date: 10/11/2021

Document Submission **Implemented**

See 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 9/12/21, at approximately 6:45 a.m. direct care staff person A was notified by resident #1 that direct care staff person B allegedly had thrown an exercise band at the resident on the evening of [REDACTED] and the incident was not reported to the Department until 9/13/21 at approximately 11:30 a.m.

Plan of Correction **Do Not Accept**

The staff received a training on the homes Abuse reporting policy which is in line with OAPSA and DHS regulations. Staff also received a training on OAPSA and DHS reporting and the process that goes with it.

Completion Date: 09/23/2021

Plan of Correction **Directed**

The staff received a training on the homes Abuse reporting policy which is in line with OAPSA and DHS regulations. Staff also received a training on OAPSA and DHS reporting and the process that goes with it. This training will be given annually and at orientation, by the administrator.

DIRECTED:

By 10/14/21: The administrator shall audit any allegations of abuse to ensure any allegation of abuse is reported in accordance with regulation 2600.16(c). 10/13/21

Completion Date: 10/11/2021

16c - Written Incident Report *(continued)*

Document Submission

Implemented

See Attached