

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

February 13, 2023

[REDACTED]
MARQUIS AID OPCO LLC
[REDACTED]
[REDACTED]

RE: MARQUIS GARDENS PLACE
660 CHERRY TREE LANE
UNIONTOWN, PA, 15401
LICENSE/COC#: 44495

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/24/2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: MARQUIS GARDENS PLACE License #: 44495 License Expiration: 07/11/2023
 Address: 660 CHERRY TREE LANE, UNIONTOWN, PA 15401
 County: FAYETTE Region: WESTERN

Administrator

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

Legal Entity

Name: MARQUIS AID OPCO LLC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: Total Daily Staff: 35 Waking Staff: 26

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #: [REDACTED]
 Reason: Incident Exit Conference Date: 01/27/2023

Inspection Dates and Department Representative

01/24/2023 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 47 Residents Served: 27

Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:

Hospice
 Current Residents: 6

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 27
 Diagnosed with Mental Illness: 1 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 8 Have Physical Disability: 1

Inspections / Reviews

01/24/2023 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/08/2023

02/07/2023 - POC Submission

Submitted By: [REDACTED] Date Submitted: 02/10/2023
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/13/2023

Inspections / Reviews *(continued)*

02/10/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/10/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 02/15/2023

02/13/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/10/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

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 [REDACTED] 23, the home submitted an incident report to the Department indicating staff person A would be suspended pending investigation; however, staff person A was working under a plan of supervision from [REDACTED] /23 through [REDACTED] /23.

Plan of Correction

Directed [REDACTED] - 02/10/2023)

- On [REDACTED] /23, received approval from DHS to have employee work without supervision.
- On [REDACTED] /23, updated incident report submitted to DHS regarding this incident to reflect factual information regarding staff person A returning to work under plan of supervision on [REDACTED] /23.
- On [REDACTED] /23, Regional Executive Director (RED) and Care Services Manager (CSM) reviewed resident records, 24 hour log and incident log and no other incidents were noted which had not been reported. By 2/10/23, RED and/or designee will audit incident reports submitted to the Department to ensure incident report is factual. Results will be reviewed with the Regional Director of Care Services (RDSCS) as necessary and updated made to the Department if discrepancies identified. (DIRECTED: The audits shall be completed daily to ensure timely reporting to the Department in accordance with 2600.16c. [REDACTED] /10/23).
- On 2/2/23, RDSCS re-educated CSM on the requirements set within regulation 2600.16c. (Exhibit 1 - Inservice) (DIRECTED: Documentation of the education shall be kept. [REDACTED] 2/10/23).
- On 2/8/23, RDSCS educated CSM and Community Relations Manager (CRM) on requirement that all staff returning to work under a plan of supervision, must be approved by the ED and/or designee prior to the return, the ED and/or designee will then report within 24 hours to the department the staff person has returned and include what supervision or measures are in place. (DIRECTED: If an allegation of abuse/neglect is reported involving a staff person, the staff person shall immediately be suspended or placed on a plan of supervision in accordance with 2600.15b. The suspension or plan of supervision shall be reported to AAA in accordance with 2600.15a, as well as to the Department in accordance with 2600.16c. The CSM and Community Relations Manager shall be educated on this requirement by 2/15/23. Documentation of the education shall be kept. [REDACTED] 2/10/23).
- On 2/6/23, CSM provided in-service to current staff, including staff persons A, and ancillary staff responsible for overseeing incidents and who are responsible for submitting incident reports on the requirements set within regulation 2600.16c including immediately upon receipt of an allegation of abuse, the staff person must immediately suspend or place on a plan of supervision involved staff member(s), and the suspension or plan of supervision shall be indicted in the incident report submitted to the Department. (Exhibit A - In-service) (DIRECTED: Documentation of the education shall be kept. [REDACTED] 2/10/23).

Directed Completion Date: 02/15/2023

Implemented [REDACTED] - 02/13/2023)