



**CERTIFIED MAIL-RETURN RECEIPT REQUESTED MAILING DATE: March 24, 2023**

[REDACTED]  
Southwestern Healthcare Operations LLC  
512 North Lewis Run Road  
Pittsburgh, Pennsylvania 151221

RE: The Residence At Arrowood  
512 North Lewis Run Road  
Pittsburgh, Pennsylvania 151221  
LICENSE/COC#: 45215

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department), licensing inspections on February 21, 2023 of the above facility, that is operating pending an appeal, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Licensing Inspection Summary were found.

Correction of these violations in accordance with the specified plan of correction is required. Failure to correct these violations may result in further licensing enforcement action.

Sincerely,

Jamie Buchenauer  
Deputy Secretary  
Office of Long-term Living

Enclosure  
Licensing Inspection Summary

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

Facility Information

Name: *THE RESIDENCE AT ARROWOOD* License #: *45215* License Expiration: *04/30/2022*  
Address: *512 N LEWIS RUN ROAD, PITTSBURGH, PA 15122*  
County: *ALLEGHENY* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *SOUTHWESTERN HEALTHCARE OPERATIONS LLC*  
Address: *512 NORTH LEWIS RUN ROAD, PITTSBURGH, PA, 15122*  
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *03/10/1997* Issued By: *Borough of Pleasant Hills*  
Type: *C-2 LP* Date: *12/05/2013* Issued By: *Borough of Pleasant Hills*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *31* Waking Staff: *23*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Monitoring* Exit Conference Date: *02/21/2023*

Inspection Dates and Department Representative

02/21/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *84* Residents Served: *24*

Secured Dementia Care Unit

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

Hospice

Current Residents: *5*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *24*  
Diagnosed with Mental Illness: *14* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *7* Have Physical Disability: *0*

Inspections / Reviews

02/21/2023 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *Exception*

132d - Evacuation

1. Requirements

2600.

132.d. Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert. For purposes of this subsection, the fire safety expert may not be a staff person of the home.

Description of Violation

On 10/19/22 at 3:25 p.m., the home conducted a fire drill with 27 residents present in the home. However, only 26 residents were evacuated during the fire drill.

Plan of Correction

Directed (█ - 03/01/2023)

DIRECTED

Within 15 days of receipt of the accepted plan of correction: The administrator shall educate all staff persons on the home's policy and procedures for evacuation and the requirements of Regulation 2600.132(d). Documentation of education shall be kept. 3/1/23 █

Within 15 days of receipt of the accepted plan of correction: The administrator shall educate all residents on the requirement to evacuate when the fire alarm is activated. Documentation of education shall be kept. 3/1/23 █

Within 15 days of receipt of the accepted plan of correction: The administrator shall audit the fire drill record monthly to ensure all residents are evacuated upon activation of the fire alarm. 3/1/23 █

Directed Completion Date: 03/31/2023