

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

January 30, 2024

[REDACTED]  
ARTIS SENIOR LIVING OF BETHEL PARK LLC  
[REDACTED]

RE: ARTIS SENIOR LIVING OF SOUTH  
HILLS  
1001 HIGBEE DRIVE  
BETHEL PARK, PA, 15102  
LICENSE/COC#: 44916

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/14/2023 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: *ARTIS SENIOR LIVING OF SOUTH HILLS* License #: *44916* License Expiration: *05/01/2024*  
 Address: *1001 HIGBEE DRIVE, BETHEL PARK, PA 15102*  
 County: *ALLEGHENY* Region: *WESTERN*

## Administrator

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

## Legal Entity

Name: *ARTIS SENIOR LIVING OF BETHEL PARK LLC*  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

## Certificate(s) of Occupancy

## Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *128* Waking Staff: *96*

## Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Complaint, Incident* Exit Conference Date: *12/14/2023*

## Inspection Dates and Department Representative

12/14/2023 - On-Site: [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

License Capacity: *72* Residents Served: *64*

## Secured Dementia Care Unit

In Home: *Yes* Area: *whole home* Capacity: *72* Residents Served: *64*

## Hospice

Current Residents: *9*

## Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *64*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *64* Have Physical Disability: *0*

## Inspections / Reviews

## 12/14/2023 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *01/22/2024*

## 01/23/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: *01/29/2024*  
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *01/30/2024*

Inspections / Reviews *(continued)*

01/30/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/29/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

225c - Additional Assessment

1. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

- 1. Annually.
- 2. If the condition of the resident significantly changes prior to the annual assessment.

Description of Violation

Since [redacted] resident [redacted] record has several notes documenting several instances of resident [redacted] displaying behaviors of agitation and combativeness, and pushing and hitting another [redacted] resident. Regardless of the possible lack of malicious intent, resident [redacted] assessment completed [redacted] indicates that resident has no problem regarding agitation or aggression. The assessment has not been updated to include the more recent behaviors.

Plan of Correction

Accept [redacted] - 01/23/2024)

Resident [redacted] RASP was updated on [redacted] to reflect the change of recent behaviors.

Director of Health and Wellness and Assistant Director of Health and Wellness will be re-educated of this requirement by Executive Director. This will be completed by Friday, January 26, 2024.

An audit of all current RASP's will be completed by Friday, January 26, 2024 to ensure that all necessary updates are included on the RASP's. This will be completed by the Director of Health and Wellness / Designee.

Director of Health and Wellness and Executive Director will meet weekly to review incident reports and state reportable incidents to ensure that RASP's are updated with the necessary information regarding recent changes to the resident's behavior and or care. Weekly meetings between the Executive Director and Director of Health and Wellness will start on the week of January 22, 2024 and will conclude on July 26, 2024.

ED / Designee will conduct RASP audit of 5 charts a week ongoing to ensure compliance.

Licensee's Proposed Overall Completion Date: 07/26/2024

Implemented [redacted] - 01/30/2024)