



CERTIFIED MAIL – RETURN RECEIPT REQUESTED

MAILING DATE: JULY 16, 2024

[REDACTED]
Mt. Assisi Place LLC
[REDACTED]

RE: Mt. Assisi Place
934 Forest Avenue
Bellevue, Pennsylvania 15202
License/COC #: 450201


Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) licensing inspections on February 26, 2024, February 27, 2024, and April 26, 2024, of the above facility, the violations specified on the enclosed Licensing Inspection Summary (LIS) were found.

Based on violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), mistreatment or abuse of resident being cared for in the facility, failure to submit an acceptable plan to correct noncompliance items, and failure to comply with the acceptable plan to correct noncompliance items, the Department hereby REVOKES your certificate of compliance (license number 450200) dated February 8, 2024 – February 8, 2025, and issues you a FIRST PROVISIONAL license to operate the above facility. A FIRST PROVISIONAL license is being issued based on your acceptable plan to correct the violations as specified on the LIS. This decision is made pursuant to 62 P.S. § 1026 (b)(1); (5) and 55 Pa. Code § 20.71(a)(2); (3); (4); (5) (relating to conditions for denial, nonrenewal or revocation). Your FIRST PROVISIONAL license is enclosed and is valid from July 16, 2024 to January 16, 2025.

All violations specified on the LIS must be corrected by the dates specified on the report and continued compliance with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), must be maintained. Failure to implement the plan of correction or failure to maintain compliance may result in a revocation of the license.

If you disagree with the decision to issue a PROVISIONAL license, you have the right to appeal through hearing before the Bureau of Hearings and Appeals, Department of Human Services in accordance with 1 Pa. Code Part II, Chapters 31-35. If you decide to appeal your PROVISIONAL license, a written request for an appeal must be received within 10 days of the date of this letter by:


Pennsylvania Department of Human Services
Bureau of Human Services Licensing
Room 631, Health and Welfare Building
625 Forster Street
Harrisburg, Pennsylvania 17120
PH: 717-265-8942

This decision is final 11 days from the date of this letter, or if you decide to appeal, upon issuance of a decision by the Bureau of Hearings and Appeals.

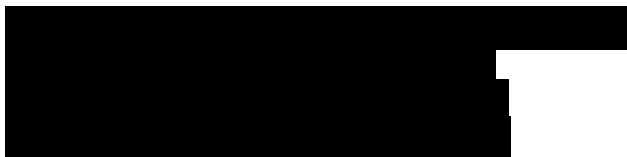
Sincerely,



Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosure
Licensing Inspection Summary

cc:



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

Facility Information

Name: *MT. ASSISI PLACE* License #: *45020* License Expiration: *02/08/2025*
Address: *934 FOREST AVENUE, BELLEVUE, PA 15202*
County: *ALLEGHENY* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *MT. ASSISI PLACE LLC*
Address: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: Total Daily Staff: *50* Waking Staff: *38*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Incident* Exit Conference Date: *05/02/2024*

Inspection Dates and Department Representative

02/26/2024 - On-Site: [REDACTED]
02/27/2024 - On-Site
04/26/2024 - Off-Site

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *81* Residents Served: *38*

Secured Dementia Care Unit

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

Hospice

Current Residents: *4*

Number of Residents Who:

Receive Supplemental Security Income: *9* Are 60 Years of Age or Older: *38*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *12* Have Physical Disability: *1*

Inspections / Reviews

02/26/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/18/2024*

05/16/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/13/2024

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 05/22/2024

05/20/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/13/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission

Follow-Up Date: 06/15/2024

06/17/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/13/2024

Reviewer: [REDACTED]

Follow-Up Type: Enforcement

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On █/25/24 at approximately 10:15am, resident #1 could not be located in the home. Numerous staff persons began searching the home and contacted the police at approximately 10:45am. Police were dispatched to the home and resident #1 was found deceased outside on a bench at the rear of the home, approximately 1/8 mile away. At the time, resident #1 was only wearing pajama pants, a pajama top and slippers; however, the outside temperature was approximately 30 degrees Fahrenheit. According to staff interviews, staff person B last saw resident #1 sleeping in █ bed on █/25/24 at approximately 5:45am. According to resident #1's death certificate, the resident died on [resident #1's date of death] with a manner of accident. The death certificate also indicates that significant conditions contributing to the death were exposure to cold (hypothermia), dementia, and poor nutritional stats and that injury occurred from exposure to outside elements.

Prior to this, on 6/3/23 at approximately 5:30am, resident #1 was found alone and unattended, laying on the grass outside the home. Resident #1 had a skin tear on █ left elbow and was brought back into the home. Resident #1's progress notes, dated 6/3/23, indicate "Will try to move resident to 2nd floor for safety"; however, on the morning of █/25/24, resident #1 still resided on the 1st floor and was never moved to the 2nd floor. Resident #1's medical evaluation, dated 2/20/23, includes diagnoses of cognitive communication deficit and dementia. Also, resident #1's assessment, dated █/13/23, indicates resident #1 requires moderate supervision in the home and needs attendance when outside the home, and resident #1's support plan, dated █/4/23, indicates resident #1 requires assistance when leaving the home.

Plan of Correction**Directed (█ - 05/20/2024)**

The Resident-Home Contract includes the criteria for admission and discharge, the general description of services and activities that the home provides. An addendum will be created and added to the contract to cover services that the home does not provide by June 7, 2024. (DIRECTED: By 6/7/24: The administrator shall develop and implement description of services which outline the specific services and activities the home can provide, as well as the services the home does not provide but will arrange or coordinate in accordance with 2600.223. The description of services shall also address residents with exit-seeking behaviors. Documentation of the description of services shall be kept. All current residents and their designated persons shall be notified in writing of the home's updated description of services by 6/7/24. Documentation of notification shall be kept in each resident's record. The updated description of services shall also be added to the home's resident-home contract by 6/7/24 for all future resident admissions. █ (5/20/24). Prospective residents identified as someone who wanders or exit seeks will not be admitted according to the amended description of services. Residents who develop wandering or exit seeking behaviors after admission will be given a 30 day discharge notice. (DIRECTED: By 6/8/24: The administrator shall review the current care needs of all residents to ensure the home can continue to meet the needs of each resident in accordance with the home's updated description of services. Any resident the home can no longer meet the needs for shall be issued a written 30-day notice in accordance with 2600.228. █ (5/20/24)

The addendum will be created by the administrator by June 7, 2024. It will be included in the admission paperwork for all new clients. The addendum will be mailed to all current residents and families on June 7, 2024. Direct care

42b - Abuse (continued)

staff will be educated on the description of services beginning June 7, 2024. (DIRECTED: Documentation of the staff education shall be kept in accordance with 2600.65i. [REDACTED] 5/20/24)
The next QM meeting will be at the end of July, 2024.

DIRECTED: By 6/15/24: The administrator shall conduct a quality management review, which includes a review of all items specified in 2600.26b. Documentation of the quality management review shall be kept. [REDACTED] 5/20/24

DIRECTED: By 6/1/24: The administrator shall develop and implement a communication system for direct care staff persons to communicate changes in resident care needs. All direct care staff persons and managerial staff persons shall receive education on the new system by 6/1/24. Documentation of the education shall be kept in accordance with 2600.65i. The administrator shall review the communication system weekly to ensure the home can continue to meet all resident's needs. [REDACTED] 5/20/24

Proposed Overall Completion Date: 06/07/2024

Directed Completion Date: 06/15/2024

Not Implemented [REDACTED] - 06/17/2024)

187b - Date/Time of Medication Admin.

2. Requirements

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

On the morning of [REDACTED] 5/24, staff person C documented resident #1's February 2024 medication administration record (MAR) as administering resident #1's morning medications to the resident, to include the following medications; however, none of the morning medications were administered to resident #1:

- Amlodipine-5mg tablet
- Aspirin-81mg tablet
- Co-Enzyme Q10-100mg capsule
- Potassium Chloride ER-10meq tablets

Plan of Correction

Directed [REDACTED] - 05/20/2024)

Staff person C is currently out on an extended medical leave. [REDACTED] expected return date has not been confirmed, but will not be earlier than 6 months.

All med techs will be re-educated on medication administration and documentation to ensure proper documentation at the time the medication is given. The education will be provided by the administrator or the director of resident services. All education will be completed by June 7, 20024 (DIRECTED: Documentation of the staff education shall be kept in accordance with 2600.65i. [REDACTED] 5/20/24). Random med pass audits will be completed weekly by the director of resident services for 6 weeks beginning June 7, 2024 to ensure compliance. (DIRECTED: At least 5 resident MAR's shall be reviewed during each of the weekly audits. Immediately following the weekly audits, the Director of Resident Services/designee shall audit at least 5 resident MAR's monthly to ensure compliance with 2600.187b. [REDACTED] 5/20/24).

187b - Date/Time of Medication Admin. (continued)

DIRECTED: By 6/15/24: The administrator shall conduct a quality management review, which includes a review of all items specified in 2600.26b. Documentation of the quality management review shall be kept. [REDACTED] 5/20/24

Proposed Overall Completion Date: 06/07/2024

Directed Completion Date: 06/15/2024

Not Implemented ([REDACTED] - 06/17/2024)

223a - Description of Service

3. Requirements

2600.

223.a. The home shall have a current written description of services and activities that the home provides including the following:

1. The scope and general description of the services and activities that the home provides.
2. The criteria for admission and discharge.
3. Specific services that the home does not provide, but will arrange or coordinate.

Description of Violation

The home does not have a current written description of services and activities that the home provides, which includes the following:

- The scope and general description of the services and activities that the home provides
- The criteria for admission and discharge
- Specific services that the home does not provide, but will arrange or coordinate

Plan of Correction

Directed [REDACTED] - 05/20/2024)

The current Resident-Home contract includes the criteria for admission and discharge. It also includes the general description of services and activities provided by the facility, as well as resident rights and house rules. An addendum will be created to expand on section C of the contract that addresses resident conditions and the ability of the home to meet those needs. Section C additions will include behaviors and care needs that the facility is not equipped to handle. (DIRECTED: By 6/7/24: The administrator shall develop and implement description of services which outline the specific services and activities the home can provide, as well as the services the home does not provide but will arrange or coordinate in accordance with 2600.223. The description of services shall also address residents with exit-seeking behaviors. Documentation of the description of services shall be kept. All current residents and their designated persons shall be notified in writing of the home's updated description of services by 6/7/24.

Documentation of notification shall be kept in each resident's record. The updated description of services shall also be added to the home's resident-home contract by 6/7/24 for all future resident admissions. [REDACTED] 5/20/24).

The addendum will be included in new admission paperwork. The addendum will be mailed to current residents and families by June 7, 2024. The administrator will create the addendum and distribute it and educate the staff by June 7, 2024. (DIRECTED: By 6/8/24: The administrator shall review the current care needs of all residents to ensure the home can continue to meet the needs of each resident in accordance with the home's updated description of services. Any resident the home can no longer meet the needs for shall be issued a written 30-day notice in accordance with 2600.228. [REDACTED] 5/20/24)

The next QM meeting is scheduled for the end of July 2024.

DIRECTED: By 6/15/24: The administrator shall conduct a quality management review, which includes a review of

223a - Description of Service (continued)

all items specified in 2600.26b. Documentation of the quality management review shall be kept. [REDACTED] 5/20/24

Proposed Overall Completion Date: 06/07/2024

Directed Completion Date: 06/15/2024

Not Implemented ([REDACTED] - 06/17/2024)