



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Emailing Date: March 28, 2024

[REDACTED]
Asbury Village and Place, LLC
[REDACTED]
[REDACTED]

RE: Asbury Villas
730 Bower Hill Road
Pittsburgh, Pennsylvania 15243
License #: 45554

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department), licensing inspections on March 20, 2024 of the above facility, we have found that your facility is in substantial compliance with the regulations, set forth in 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because this is a new legal entity operating the home.

In accordance with 55 Pa.Code § 2600.11(b) (relating to procedural requirements for licensure or approval of personal care homes) a re-inspection of your newly licensed facility will be conducted within 3 months of the effective date of this license. Complete compliance with all applicable regulations is required in order to maintain your license.

Your NEW license is enclosed.

Sincerely,

A handwritten signature in black ink that reads "Juliet Marsala".

Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosures
License
Licensing Inspection Summary

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

Facility Information

Name: *ASBURY VILLAS* License #: *45554* License Expiration:
Address: *730 BOWER HILL ROAD, PITTSBURGH, PA 15243*
County: *ALLEGHENY* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *ASBURY VILLAGE AND PLACE, LLC*
Address: [REDACTED]
Phone: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *08/19/2002* Issued By: *Labor & Industry*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *69* Waking Staff: *52*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint, Provisional, Change Legal Entity* Exit Conference Date: *03/21/2024*

Inspection Dates and Department Representative

03/20/2024 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: Residents Served: *67*

Secured Dementia Care Unit

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

Hospice

Current Residents: *2*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *67*
Diagnosed with Mental Illness: *2* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *2* Have Physical Disability: *0*

Inspections / Reviews

03/20/2024 - Partial

Lead [REDACTED] [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *04/01/2024*

03/25/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 03/27/2024

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 03/27/2024

03/26/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 03/27/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 04/02/2024

03/27/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/27/2024

Reviewer: [REDACTED]

Follow-Up Type: Exception

17 - Record Confidentiality

1. Requirements

2600.

17. Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

Description of Violation

At 11:20 a.m., numerous resident records were unlocked, unattended and accessible in the 1st floor nursing station, to include the following:

- Resident records for all of the residents in the home
- Folders containing face sheets/transfer sheets containing resident names, marital status, DOB, insurance information, copies of drivers licenses, and POA documentation
- The Narcotic Scripts binder containing numerous resident names, DOB, and medications

Plan of Correction

Accept [redacted] - 03/26/2024)

- Asbury Ensure to provide privacy and confidentiality for all resident and their records.
- On March 20, 2024, Nurse station door immediately locked and secure.
- On March 20,2024 a sign on the door stating Keep Door closed and Locked at all times was place.
- Staff education on the regulation 2600.17 confidentiality of records and will be completed by March 29, 2024
- On March 21,2024 maintenance ordered keypad lock for the nurse's station to ensure the door will be locked at all times and resident records will be secure.
- DRC/Assigned Designee has started immediately on 3/20/2024 with auditing and will be done daily until Keypad lock is installed then weekly for 3months or until substantial compliance is achieved.

Licensee's Proposed Overall Completion Date: 03/25/2024

103g - Storing Food

2. Requirements

2600.

103.g. Food shall be stored in closed or sealed containers.

Description of Violation

There was an unsealed 10-pound box of sausage patties and an unsealed box of 64 beef burger patties in freezer #4 in the kitchen.

Plan of Correction

Accept [redacted] - 03/25/2024)

- Asbury takes pride on providing exceptional dining services and food.
- On March 20, 2024, open packages of hamburgers and sausage patties were found in the kitchen freezer. The packages were immediately sealed.
- On March 25,2024 Education will be present to food service staff about how to appropriately seal and store food.
- Education signed off on food service staff and completed by March 29th, 2024
- Audit will be completed by dining service manager weekly for 3month and findings will be notified to the administrator.

Licensee's Proposed Overall Completion Date: 03/22/2024

131e - Accessible Extinguishers

3. Requirements

2600.

131.e. Fire extinguishers shall be accessible to staff persons. Fire extinguishers shall be kept locked if access to the extinguisher by a resident could cause a safety risk to the resident. If fire extinguishers are kept locked, each staff person shall be able to immediately unlock the fire extinguisher in the event of a fire emergency.

Description of Violation

The fire extinguisher on the wall in the 3rd floor resident lounge was blocked by a sitting chair, therefore, it was not accessible to staff.

Plan of Correction

Accept [REDACTED] - 03/26/2024)

- Asbury takes safety for the resident very seriously.
- On March 20,2024 the piece of furniture that was in front of the fire extinguisher in 3rd floor resident lounge was immediately removed to gain access to the fire extinguisher
- On March 22,2023 Maintenance was notified of the issue and work order was placed to move the fire extinguisher to a location where furniture will not be available to block the access of the fire extinguisher.
- Staff education provide on regulation 2600.131(e) and the need for accessibility to the fire extinguisher and will be completed by March 29th, 2024
- DRC/Assigned Designee has started Auditing immediately on 3/20/2024 and will be conducted to ensure the fire extinguisher is free of furniture and accessible weekly for 3months or until substantial compliance is achieved.

Licensee's Proposed Overall Completion Date: 03/25/2024