

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

July 1, 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 04/26/2024 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: *05/01/2025*
 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

Type: *I-2* Date: *04/19/2018* Issued By: *Municipality of Bethel Park*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *134* Waking Staff: *101*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: *04/26/2024*

Inspection Dates and Department Representative

04/26/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *72* Residents Served: *67*

Secured Dementia Care Unit

In Home: *Yes* Area: *Entire home* Capacity: *72* Residents Served: *67*

Hospice

Current Residents: *14*

Number of Residents Who:

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

Inspections / Reviews

04/26/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/23/2024*

05/24/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: *06/28/2024*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/30/2024*

Inspections / Reviews *(continued)*

05/31/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/28/2024

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 06/28/2024

07/01/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/28/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

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 [redacted] at approximately 2:00 AM, staff person A squeezed resident [redacted] hand "rough and very hard" while providing incontinence care in resident [redacted] bedroom. Resident [redacted] indicated they are now "fearful" of staff person A and does not want staff person A provide care to the resident anymore.

REPEAT VIOLATION: 1/18/2024; 10/19/2023

Plan of Correction

Directed [redacted] - 05/31/2024)

Staff person "A" was immediately suspended on [redacted] pending investigation.

Staff person "A" was terminated on [redacted] following investigation from DHS.

Executive Director / Designee will re-educate all staff about the benefits / resources offered by the EAP at the All Associate meeting on Tuesday, May 28, 2024. All associates will be educated by June 28, 2024. (DIRECTED: Documentation of the education shall be kept in accordance with 2600.65i. [redacted] 5/31/24).

Executive Director / Designee will re-educate associates on abuse and neglect at our All Associate meeting on Tuesday, May 28, 2024. All associates will be educated by June 28, 2024. (DIRECTED: Documentation of the education shall be kept in accordance with 2600.65i. [redacted] 5/31/24).

Beginning Friday, May 31, 2024 a director will do a daily walk through to monitor associates for signs of frustration, burnout, need for additional training. We will rotate between our 7a-3p and 3-11 shift and once a week will monitor 11p- 7a and will document on attached form. This will continue until June 30, 2024. If any concerns are observed they will be reported immediately to the Executive Director who will create a plan for additional trainings and support.

The Director of the Artis Way / Designee will continue to interview 1 associate weekly until July 31st to ensure that residents are not neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way. All interviews will be kept in the administrator's office. Please see attachment for employee interview questions.

The Director of the Artis Way Experience / Designee will continue to interview one resident weekly to ensure that residents are not neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way. All interviews will be kept in the administrator's office. Please see the attached questionnaire on Dignity and Respect.

The results of our walk through monitoring and weekly interviews will be reviewed at our QA meeting June 26, 2024.

Proposed Overall Completion Date: 07/31/2024

Directed Completion Date: 06/28/2024

Implemented [redacted] 07/01/2024)