

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 05/23/2024 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: *136* Waking Staff: *102*

## Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Complaint, Incident* Exit Conference Date: *05/23/2024*

## Inspection Dates and Department Representative

*05/23/2024 - On-Site:* [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

License Capacity: *72* Residents Served: *68*

## Secured Dementia Care Unit

In Home: *Yes* Area: *Entire home* Capacity: *72* Residents Served: *68*

## Hospice

Current Residents: *14*

## Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *68*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *68* Have Physical Disability: *0*

## Inspections / Reviews

## 05/23/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/09/2024*

## 06/10/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: *06/28/2024*  
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/14/2024*

Inspections / Reviews (*continued*)

06/17/2024 - 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 [REDACTED] direct care staff person A witnessed resident [REDACTED] touching resident [REDACTED] and [REDACTED] area in the common living room. Direct care staff person A immediately redirected resident [REDACTED] away from resident [REDACTED]. While redirecting resident [REDACTED] direct care staff person A told resident [REDACTED] that the behavior was inappropriate and resident [REDACTED] responded, [REDACTED]

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

## Plan of Correction

Accept [REDACTED] - 06/17/2024)

On May 6, 2024 staff person "A" immediately separated resident [REDACTED] away from resident [REDACTED] and notified the LPN who was on that neighborhood. The LPN notified [REDACTED] Director of Health and Wellness at 2:50 PM.

[REDACTED] notified Adult Protective Services at 3:27 PM on May 6, 2024. [REDACTED] also notified Bethel Park Police and Officer Gittings met with [REDACTED] and [REDACTED], Executive Director.

Resident [REDACTED] was placed on 15 minute checks for the next 24 hours and a UA C&S order was requested from the resident's physician.

Resident [REDACTED] had no recollection of the incident when interviewed by Elizabeth King, Director of Health and Wellness.

Resident [REDACTED] and [REDACTED] both have a diagnosis of Dementia.

Resident [REDACTED] did not have a history of sexual behaviors prior to the incident that occurred on May 6, 2024. We have not experienced any sexual behaviors since this incident.

Associates will monitor Resident [REDACTED] for any unusual behavior and immediately report it the Director of Health and Wellness / Supervisor.

Resident [REDACTED] will be sitting next to same sex residents in the dining room when possible.

The support plan for resident [REDACTED] was updated on June 14, 2024 by [REDACTED], Director of Health and Wellness. This is what was added "Life Enrichment and other DCS will encourage Resident [REDACTED] to participate in activities and programming often in an effort to keep him engaged. When inappropriate occurs or are suspected that they might occur, DCS will immediately separate the involved residents and redirect conversation or activity. DCS will notify the Director of Health and Wellness / Supervisor once residents have been separated. MD, Hospice, and POA to be notified of any incidents or concerns. Labs to be conducted and medications to be administered per MD orders.

Executive Director / Designee will re-educate all associates on abuse and neglect at our ALL Associate meeting on

**42b - Abuse (continued)**

Tuesday, May 28, 2024. All associates will be educated by June 28, 2024. Documentation of the education shall be kept in accordance with 2600.65i.

Executive Director / Designee will re-educate all associates on Resident Rights at our ALL Associate meeting on Tuesday, June 25, 2024. All associates will be educated by July 26, 2024. Documentation of the education shall be kept in accordance with 2600.65i.

Director of the Artis Way Experience / Designee will continue to interview 1 resident weekly to ensure that residents are not neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way. We have added a question regarding if the resident has felt uncomfortable in any way. This will start the week of June 10, 2024 and go until August 30, 2024. All interviews will be kept in the administrators office.

The review of this incident along with the review of the re-educations will be reviewed at our QA meetings on June 26, 2024 and July 24, 2024.

Licensee's Proposed Overall Completion Date: 08/30/2024

Implemented [REDACTED] - 07/01/2024)