



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: FEBRUARY 4, 2025

[REDACTED]
KJ Bethel Park, LLC
2000 Cool Springs Drive
Pittsburgh, Pennsylvania 15234

RE: The Sheridan at Bethel Park
License #: 44948

Dear [REDACTED]:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing (Department) licensing inspections on November 15, 2024, and November 21, 2024, of the above facility that is operating pending an appeal, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Licensing Inspection Summary were found.

Correction of these violations in accordance with the specified plan of correction is required. Failure to correct these violations may result in further licensing enforcement action.

Sincerely,

A handwritten signature in cursive script that reads "Juliet Marsala".

Juliet Marsala
Deputy Secretary
Office of Long-term Living

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

Facility Information

Name: *THE SHERIDAN AT BETHEL PARK* License #: 44948 License Expiration: 06/01/2024
Address: 2000 COOL SPRINGS DRIVE, PITTSBURGH, PA 15234
County: ALLEGHENY Region: WESTERN

Administrator

Name: [REDACTED]

Legal Entity

Name: *KJ BETHEL PARK LLC*
Address: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 129 Waking Staff: 97

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint, Monitoring* Exit Conference Date: 12/16/2024

Inspection Dates and Department Representative

11/15/2024 - On-Site: [REDACTED]
11/21/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 147 Residents Served: 81

Secured Dementia Care Unit

In Home: *Yes* Area: *MC1 & MC2* Capacity: 40 Residents Served: 26

Hospice

Current Residents: 19

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 80
Diagnosed with Mental Illness: 25 Diagnosed with Intellectual Disability: 1
Have Mobility Need: 48 Have Physical Disability: 1

Inspections / Reviews

11/15/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *Enforcement*

101j7 - Lighting/Operable Lamp

1. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

On 11/15/24, there was no light bulb in the bedside lamp in bedroom 108.

Plan of Correction

Directed [REDACTED] 12/24/2024)

Within 1 day of receipt of the plan of correction - The lightbulb in resident room 108 will be replaced. All residents will have an operable source of lighting that can be turned on/off at bedside. - [REDACTED] 12/20/24

Within 7 days of receipt of the plan of correction - All staff persons will be educated regarding the importance of bedside lighting for resident safety and to report or replace missing or inoperable bedside lights. Documentation will be kept. - [REDACTED] 12/20/24

Within 7 days of receipt of the plan of correction - A designated staff person will monitor the home daily to ensure each resident has an operable source of lighting that can be turned on/off from bedside. Documentation will be kept. - [REDACTED] 12/20/24

Within 7 days of receipt of the plan of correction - The administrator will monitor the home at least weekly to ensure each resident has an operable source of lighting that can be turned on/off from bedside. Documentation will be kept. - [REDACTED] 12/20/24

Directed Completion Date: 12/31/2024

187d - Follow Prescriber's Orders

2. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

On 8/28/24, resident #1's physician ordered a splint for the resident's right hand, to be placed on in the morning and removed at bedtime for three weeks. However, multiple staff interviews indicated staff was unaware of the order and the splint was never used on resident #1's right hand.

Repeat Violation: 9/18/24, 8/26/24 et al., 5/9/24 et al, 3/19/24 et.al, 2/22/24 et al, and 1/22/24 et al

Plan of Correction

Directed [REDACTED] 12/24/2024)

Within 1 day of receipt of the plan of correction - A designated staff person will review physician orders after each resident's physician appointment and after hospitalization to ensure all prescriptions orders, including medical devices, are current, and accurately documented on all resident treatment administration records (TARs) and medication administration records (MARs) and that the medical devices and medications are available in the home. - [REDACTED] 12/20/24

187d - Follow Prescriber's Orders (continued)

Within 1 day of receipt of the plan of correction – A designated staff person will monitor the MAR and the TAR daily to ensure prescriber's orders are followed. Documentation will be kept. - [REDACTED] 12/20/24

Within 5 days of receipt of the plan of correction – All staff persons providing assistance with medical devices and administering medication will be reeducated on proper procedures including following the orders of the prescriber. Documentation will be kept.

- [REDACTED] 12/20/24

Within 7 calendar days of receipt of the plan of correction - The administrator or designee, who has current medication training, will monitor the MAR and TAR at least weekly and observe a medication pass by each staff person who administers medication at least two times, then monthly thereafter, to ensure all physician orders are followed. Documentation will be kept. - [REDACTED] /20/24

Directed Completion Date: 12/24/2024