

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

May 18, 2026

[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 02/12/2026 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:** 06/10/2026
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

Staffing Hours

Resident Support Staff: **Total Daily Staff:** 128 **Waking Staff:** 96

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident **Exit Conference Date:** 02/12/2026

Inspection Dates and Department Representative

02/12/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 72 **Residents Served:** 64

Secured Dementia Care Unit

In Home: Yes **Area:** Entire Home **Capacity:** 72 **Residents Served:** 64

Hospice

Current Residents: 19

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 64
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 64 **Have Physical Disability:** 1

Inspections / Reviews

02/12/2026 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 03/19/2026

03/25/2026 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 05/14/2026
Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 03/31/2026

Inspections / Reviews *(continued)*

04/06/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/14/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 05/14/2026

05/18/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/14/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

142a - Secure Medical Care

1. Requirements

2600.

142.a. The home shall assist the resident to secure medical care if a resident's health status declines. The home shall document the resident's need for the medical care, including updating the resident's assessment and support plan.

Description of Violation

On [redacted] at approximately 2:15pm, resident [redacted] had an unwitnessed fall in the home and hit their head, which resulted in a [redacted] and [redacted] above resident [redacted]. The home didn't secure needed medical care for resident [redacted] until approximately 4:22pm on [redacted] when a call was made for an ambulance to transport resident [redacted] to the hospital. Resident [redacted] passed away at the hospital on resident [redacted] date of death. Resident [redacted] cause of death was [redacted] to the [redacted] due to a [redacted]. The home failed to secure needed medical care in a timely manner for resident [redacted] after the resident's health status declined significantly due to a fall.

Plan of Correction

Accept [redacted] - 04/06/2026)

1. Immediate Actions Taken (Completed)

Following the incident on 01/23/2026, The Director of Health and Wellness completed a nursing assessment following the fall of resident [redacted]. First aid was provided by applying pressure to stop the bleeding of the laceration and provided ice. The Med Tech on duty immediately notified Resident [redacted]'s Power of Attorney (POA) at 2:25 PM regarding the fall and the visible injury above the resident's right eye. The POA instructed staff not to contact emergency medical services and stated that the family was already en route to the community to personally transport the resident to the hospital.

Upon arrival, the family attempted to transfer the resident into their vehicle. When the resident was unable to complete the transfer safely due to their condition, the family authorized staff to call EMS. EMS was contacted at 4:22 PM, and the resident was transported to the hospital for evaluation and treatment.

2. The Vice President of Health and Wellness is currently updating our fall policy for licensed and unlicensed staff. We will have an approval date of May 1, 2026 and a full implementation date of May 15, 2026.

2. Staff Re-Education

By May 7, 2026, the Director of Health and Wellness will be re-educated by the Regional Director of Health and Wellness on the modified Fall Policy. Documentation of education shall be kept in accordance with 2600.65i.

The Director of Health and Wellness will re-educate all Nurses and Med Techs by May 14, 2026 on modified Fall Policy.

Documentation of education shall be kept in accordance with 2600.65i.

3. Ongoing Compliance

The Director of Health and Wellness and Executive Director will review all incident reports daily to ensure that we are following our policy and procedure.

Any deficiencies will be reviewed internally for continuous improvement purposes at our monthly QA meetings.

Proposed Overall Completion Date: 05/14/2026

142a Secure Medical Care *(continued)*

Licensee's Proposed Overall Completion Date: 05/14/2026

Implemented [REDACTED] - 05/18/2026)