



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail: rbecker@jaapgh.org
adukes@jaapgh.org

MAILING DATE: December 12, 2019

Ms. Mary Ann Foley
Chief Operating Officer
Jewish Home and Hospital for the Aging at Pittsburgh
200 JHF Drive
Pittsburgh, Pennsylvania 15217

RE: Ahava Memory Care Residence
License #: 448580

Dear Ms. Foley:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on October 30, 2019, of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read "Suzy Quinn".

Suzy Quinn
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

RECEIVED

12/6/19

Western Region Field Office
Bureau of Human Services Licensing

Violation Report

Facility Information		
Name: AHAVA MEMORY CARE RESIDENCE Address: 200 JHF DRIVE, PITTSBURGH, PA 15217 County: ALLEGHENY Region: WESTERN		License Number: 44858
Administrator:		
Name: Rena Becker	Phone: 4125218299	Email: DWHORVITZ@JAAPGH.ORG
Legal Entity		
Name: JEWISH HOME AND HOSPITAL FOR AGED AT PITTSBURGH Address: 200 JHF DRIVE, PITTSBURGH, PA, 15217		
Certificate(s) of Occupancy		
Type: 1-2	Date:	Issued By:
Staffing Hours		
Resident Support Staff: 0	Total Daily Staff: 52	Waking Staff: 39
Inspection		
Type: Partial Reason: Complaint	BHA Docket #:	Notice: Unannounced
Inspection Dates and Department Representative		
10/30/2019 - On-Site: Barb Barone		
Resident Demographic Data as of Inspection Dates		
General Information		
License Capacity: 30	Residents Served: 26	
Special Care Unit		
In Home: Yes	Area: AHAVA Memory Care Center	Capacity: 30 Residents Served: 26
Hospice		
Current Residents: 5		
Number of Residents Who:		
Receive Supplemental Security Income: 0	Are 60 Years of Age or Older: 26	
Diagnosed with Mental Illness: 0	Diagnosed with Intellectual Disability: 0	
Have Mobility Need: 26	Have Physical Disability: 0	

141b1 Annual medical evaluation

Requirements

2800.

141.b. A resident shall have a medical evaluation:

- 1. At least annually.

Description of Violation

Resident #1's date of admission was 10/16/17. Her most recent medical evaluation is dated 8/20/18.

Plan of Correction (POC)

(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

- ADME Completed and received 10/31/19.
- Color coded spreadsheet created to track need for ADME.
- Director of Resident Care and Administrator ^{or designee} will review spreadsheet by the 5th of every month to assess the ADME needs for the following 90 days to work to keep doctor's appointments up to date and ADMEs completed. Implemented 11/27/19. ED [redacted], assistant ED [redacted], and Interim Director of Resident Care trained on ~~10/31/19~~ Dec 5, 2019.
- Monthly reviews begin Dec 5, 2019.
- Documentation of reviews will be kept on spreadsheet and updated monthly beginning 12/15/19.

Legal Entity Representative

Amy Dukes
Signature

Amy Dukes Interim Executive Director 11/27/19
Printed Name and Title Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX

The above plan of correction is approved as of

12/9/19
(Date)

Plan of correction implementation status as of

12/9/19
(Date)

Implemented

The above plan of correction was approved by

se
(Initials)

Not Implemented