



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**

**MAILING DATE:**

**DEC 6 2013**

Mr. Gary Renwick, Administrator  
Tithonus Mt. Lebanon, LP  
c/o Integracare Corporation  
6600 Brooktree Court, Suite 1000  
Wexford, Pennsylvania 15090

**RE: The Pines of Mt. Lebanon  
1537 Washington Road  
Pittsburgh, Pennsylvania 15228**

Dear Mr. Renwick:

As a result of the Department of Public Welfare's (Department) licensing inspection on July 3, 2013, of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Human Services Licensing so that compliance can be verified.

Sincerely,

A handwritten signature in cursive script, appearing to read "Janine Wenzig".

Janine Wenzig  
Regional Licensing Administrator

Enclosure  
Licensing Inspection Summary



Violation Report: 43361 - 07/03/2013 - Whitney, Diane  
PCH Name: THE PINES OF MT LEBANON

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.234(e) - The resident or the resident's designated person shall be involved in the development and the revisions of the support plan.

2a. DESCRIPTION OF VIOLATION

The support plan for resident #1, dated 4-26-2013, was not signed by the resident and/or designated person and did not indicate if the resident and/or designated person participated in the plan or was able to sign the plan.

3. 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.

See Attachment  
A

Executed  
9-4-13

Repeat Violation: No      Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Gary Renwick, Executive Director*      Date *9-4-13*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 12/4/13  
(Date)

The above plan of correction was approved by [Signature]  
(Initials)

Plan of correction implementation status as of 12/4/13  
(Date)

- Fully Implemented *[Signature]*
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

RECEIVED

SEP 4 2013

WEST REGION FIELD OFFICE  
Human Services Licensing

Plan of Correction  
The Pines of Mt. Lebanon  
1537 Washington Road  
Pittsburgh, Pa 15228  
412-341-4400

**Attachment A:**

1. Regulation:

The resident or the resident's designated person shall be involved in the development and the revisions of the support plan.

2a: Description of Violation:

The support plan for resident #1, dated 4-26-13, was not signed by the resident and/or designated person and did not indicate if the resident and/or designated person participated in the plan or was able to sign the plan.

3. POC:

- During a recent DPW field visit, it was determined that resident #1 and/or the designated person did not sign the support plan.
- On 7/5/13, the Director of Resident Care Services reviewed the support plan with resident #1 and it was signed at that time.
- By 11/1/13, the Executive Director or designee will ensure that all current residents and/or designated persons sign or participate in the individualized support plan.
- Moving forward and with every new resident, the Executive Director or designee will ensure that all residents and/or designated persons participate and sign their individualized support plan.

*Handwritten signature and date:*  
9-4-13

Violation Report: 43361 - 07/03/2013 - Whitney, Diane  
PCH Name: THE PINES OF MT LEBANON

RECEIVED

1. REGULATION 55 Pa.Code §2600  
2600.252 - Each resident's record must include the following information: (1) through (26)

SEP 4 2013

WEST REGION FIELD OFFICE  
Human Services Licensing

2a. DESCRIPTION OF VIOLATION

Resident #1's record does not include a copy of incident reports submitted to the Department.

3. 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.

See Attachment  
B

Gary  
Renwick  
9-4-13

Repeat Violation: No      Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page) *Gary Renwick*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Gary Renwick Executive Director*      Date *9-4-13*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 12/4/13  
(Date)

Plan of correction implementation status as of 12/4/13  
(Date)

The above plan of correction was approved by [Signature]  
(Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

RECEIVED

SEP 4 2013

WEST REGION FIELD OFFICE  
Human Services Licensing

**Attachment B:**

1. Regulation:

Each resident's record must include the following information: (1) through (26)

2a: Description of Violation:

Resident #1's record does not include a copy of incident reports submitted to the Department.

3. POC:

- During a recent DPW field visit, it was determined that resident #1's record did not include a copy of incident reports submitted to DPW.
- On 7/5/13, the Executive Director or designee completed an audit of all resident records to ensure compliance regarding this regulation. It was discovered that incident reports were kept in a separate binder located in the administration office.
- On 7/12/13, new tabs were added to all resident records to include incident reports. Additionally, copies of all incident reports sent to DPW were removed from the administration binder and filed within the resident's individual record.
- Moving forward, the Executive Director or designee will ensure that all incident reports sent to DPW to be included within the resident's record.

*Ami Onel*  
9-4-13

*B*  
10/4/13