



AUG 14 2014

Mr. Bryan Hudson, EVP, General Counsel and Secretary
WG South Hills SH, LLC
401 S. Fourth Street, Suite 1900
Louisville, Kentucky 40202

RE: Atria South Hills
5300 Clairton Boulevard
Pittsburgh, Pennsylvania 15236
License #: 442840

Dear Mr. Hudson:

As a result of the Department of Public Welfare's licensing inspection on June 4, 2014 and June 5, 2014, 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.

Your regular license for the period October 16, 2014 to October 16, 2015 was issued on July 7, 2014. Your regular license remains in good standing.

Sincerely,

Matthew J. Jones
Director

MS

Enclosure
License Inspection Summary

**VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: ATRIA SOUTH HILLS		License Number: 44284
Address: 5300 CLAIRTON BOULEVARD, PITTSBURGH, PA 15236		County: Allegheny
Administrator: Beverly Bowser		Region: WEST
Legal Entity Name: WG SOUTH HILLS SH LLC		RECEIVED
Legal Entity Address: 401 S FOURTH STREET SUITE 1900, LOUISVILLE, KY 40202		
Certificate(s) of Occupancy C-2 LP 03/04/1999 L&I		WEST REGION FIELD OFFICE Human Services Licensing
Staffing Hours		
Resident Support: 0	Total Daily Staff: 104	Waking Staff: 78
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 06/04/2014: Williams, Jason; Whitney, Diane 06/05/2014: Williams, Jason		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 139	Number of Residents who:	
Number of Residents Served: 94	Receive Supplemental Security Income: 0	
Secured Dementia Care Unit in Home: No	Are 60 Years of Age or Older: 91	
Area:	Have Mental Illness: 1	
Secured Dementia Unit Capacity, if Applicable:	Have an Intellectual Disability: 2	
Number of Residents Served in Secured Dementia Care Unit, if applicable:	Have a Mobility Need: 10	
Number of Current Hospice Residents: 4	Have a Physical Disability: 0	
Number of Hospice Residents in past year: 16		

Violation Report: 44284 - 06/04/2014 - Williams, Jason
PCH Name: ATRIA SOUTH HILLS

1. REGULATION 55 Pa.Code §2600
2600.18 - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

WEST REGION FIELD OFFICE
Human Services Licensing

2a. DESCRIPTION OF VIOLATION
Pursuant to Act 56 of 2007 and 62 P.S. 1057.3(i), "no person, organization, or program shall use the term 'assisted living' in any name or written material" unless the person, organization or program is an assisted living residence licensed in accordance with 55 Pa.Code chapter 2800 (relating to assisted living residences). The home uses the term "assisted living" on its Level of Care Change Letter, in its home rules and in its Pharmacy Coverage Determination Form.

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.

The community has replaced the term 'Assisted Living' with 'Senior Living' on the Home Rules, and Pharmacy Coverage Determination Form provided to residents upon move-in to the community (Attached) 6/5/14

The term 'Assisted Living Services' has been replaced with 'Supportive Living Services' on the Level of Care Change Letter. (Attached) 6/5/14

Atria South Hills has submitted this Plan of Correction in order to comply with state regulatory provisions. The preparation and submission of this Plan of Correction does not constitute an admission of fault or liability on the part of Atria South Hills or an agreement by Atria South Hills regarding the truth or accuracy of the facts alleged or conclusions drawn.

[Within 30 days upon receipt of the plan of correction, the Administrator will audit all written materials to ensure that the term "assisted living" is not used unless the home obtains licensure as an assisted living residence. If the term "assisted living" is found to be used in written materials, the home will modify the document immediately. (CHG 7/24/14)] *CHG*

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

Signature of Legal Entity Representative (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *ADMINISTRATOR*
BEVERLY DOWSER Date *7/12/14*

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

The above plan of correction is approved as of *7/24/14*
(Date)

Plan of correction implementation status as of *7/24/14*
(Date)

The above plan of correction was approved by *CHG*
(Initials)

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

Violation Report: 44284 - 06/04/2014 - Williams, Jason
PCH Name: ATRIA SOUTH HILLS

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.25(b) - The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

2a. DESCRIPTION OF VIOLATION

- The contract, dated 10/21/13, for Resident #1, is not signed by the resident.
- The contract, dated 12/13/11, for Resident #2, is not signed by the resident.
- The contract, dated 12/30/13, for Resident #3, is not signed by the resident.

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.

The Executive Director and Community Business Director will audit current resident files to ensure resident signatures are on the contract. If the resident is unable to sign, the residents POA/Guardian/Conservator will be required to sign the contract and the community will document the resident's inability to sign on the contract. 7/21/14

Signatures will be obtained for any files found not to have resident signatures present. The signature will be dated at the time the resident signs. 7/31/14

New move in contracts will be reviewed by the Executive Director to ensure resident signatures are present. 6/5/14

Atria South Hills has submitted this Plan of Correction in order to comply with state regulatory provisions. The preparation and submission of this Plan of Correction does not constitute an admission of fault or liability on the part of Atria South Hills or an agreement by Atria South Hills regarding the truth or accuracy of the facts alleged or conclusions drawn.

[The three contracts have been either signed by the residents or indicate the ability of the resident to sign the contracts. (CHG 7/24/14)] *CHG*

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
(Required on EVERY Page)

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *ADMINISTRATOR*
BEVERLY A BOWSER Date *7/17/14*

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

The above plan of correction is approved as of *7/24/14*
(Date)

The above plan of correction was approved by *CHG*
(Initials)

Plan of correction implementation status as of *7/24/14*
(Date)

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

Violation Report: 44284 - 06/04/2014 - Williams, Jason
PCH Name: ATRIA SOUTH HILLS

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.51 - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (OAPSA) (35 P.S. §§ 10225.101-10225.5102) and 6 Pa.Code Chapter 15 (relating to protective services for older adults).

2a. DESCRIPTION OF VIOLATION

The PA State Police background check, dated 3/11/14, for Staff person A, hired 3/26/14, contains a charge that is prohibitive if the grade is a felony. The grade of this charge is not listed on the background check and the home has not pursued the grade of this charge.

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.

The grade of charge was verified on 6/5/14 during the time of inspection. Felony charges were verified as withdrawn. (See Attached). 6/5/14

The Executive Director will review any potential hire that has convictions or pending charges on their back ground check to ensure the charges are not prohibitive. Supporting documentation will be present in the employees file to verify compliance 6/5/14

Atria South Hills has submitted this Plan of Correction in order to comply with state regulatory provisions. The preparation and submission of this Plan of Correction does not constitute an admission of fault or liability on the part of Atria South Hills or an agreement by Atria South Hills regarding the truth or accuracy of the facts alleged or conclusions drawn.

[The Administrator of designee will audit all criminal background checks in staff files to ensure that they do not contain any prohibitive offenses upon receipt of the plan of correction. If a prohibitive offense is found on a background check not to have a grade specified, then the staff person will be suspended until verification that the offense is not prohibitive is obtained. Staff persons involved in the reviews of the background checks will complete the following training on criminal background checks within one month of receipt of the plan of correction:

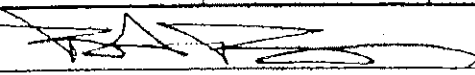
http://www.portal.state.pa.us/portal/server.pt/community/self_study_course/18031 (CHG 7/24/14)

CHG

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)



Printed Name and Title of Legal Entity Representative
(Required on EVERY Page)

BEVERLY A BOWER ADMINISTRATOR

Date

7/17/14

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

The above plan of correction is approved as of

7/24/14
(Date)

Plan of correction implementation status as of

7/24/14
(Date)

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

The above plan of correction was approved by

CHG
(Initials)

Violation Report: 44284 - 06/04/2014 - Williams, Jason
PCH Name: ATRIA SOUTH HILLS

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.85(d) - Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

2a. DESCRIPTION OF VIOLATION

On 6/4/14, the trash cans in both the men's and women's public bathrooms, next to the first floor private dining room, do not have covers on them.

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.

Uncovered trash cans were replaced with covered receptacles at the time of inspection
6/5/14

The maintenance director verified that waste receptacles placed in kitchens and bathrooms have the proper covering to prevent the penetration of insects and rodents.
6/5/14

Ongoing compliance will be verified by Maintenance Director during monthly rounds.
6/5/14-ongoing

Atria South Hills has submitted this Plan of Correction in order to comply with state regulatory provisions. The preparation and submission of this Plan of Correction does not constitute an admission of fault or liability on the part of Atria South Hills or an agreement by Atria South Hills regarding the truth or accuracy of the facts alleged or conclusions drawn.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page)

ADMINISTRATOR
BEVERLY BOWSEN

Date: 7/17/14

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

The above plan of correction is approved as of 7/24/14
(Date)

Plan of correction implementation status as of 7/24/14
(Date)

The above plan of correction was approved by CBG
(Initials)

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

Violation Report: 44284 - 06/04/2014 - Williams, Jason
 PCH Name: ATRIA SOUTH HILLS

1. REGULATION 55 Pa.Code §2600
 2600.132(e) - A fire drill shall be held during sleeping hours once every 6 months.

WEST REGION FIELD OFFICE
 Human Services Licensing

2a. DESCRIPTION OF VIOLATION

The last two sleeping hour fire drills conducted by the home were on 9/28/13 and 4/28/14 which exceeds six months.

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.

Yearly fire drill log will be completed at the beginning of each calendar year designating sleeping hour fires drills every six months. (See Attached) 6/5/14

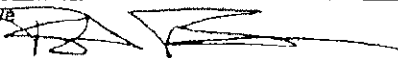
The Executive Director will verify that sleeping hour fires drills are completed once every six months. 6/5/14

Atria South Hills has submitted this Plan of Correction in order to comply with state regulatory provisions. The preparation and submission of this Plan of Correction does not constitute an admission of fault or liability on the part of Atria South Hills or an agreement by Atria South Hills regarding the truth or accuracy of the facts alleged or conclusions drawn.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)



Printed Name and Title of Legal Entity Representative
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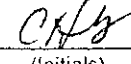
BEVERLY A. BOWSER, ADMINISTRATOR


Date 7/17/14

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

The above plan of correction is approved as of 7/24/14
 (Date)

Plan of correction implementation status as of 7/24/14
 (Date)

The above plan of correction was approved by 
 (Initials)

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

Violation Report: 44284 - 06/04/2014 - Williams, Jason
 PCH Name: ATRIA SOUTH HILLS

RECEIVED

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

2a. DESCRIPTION OF VIOLATION
 There is no inventory of personal belongings in the records of Resident #3, #4, #5, #6, or #7.

WEST REGION FIELD OFFICE
 Human Services Licensing

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.

An inventory of personal belonging form will be provided to each resident upon move in for completion. Refusals to complete will be documented. (See Attached)

7/21/14

Existing resident's files will be audited and an inventory of personal belongings form will be provided to each resident without a current listing on file. Assistance with completion will be offered. Refusals will be documented

8/10/14

Atria South Hills has submitted this Plan of Correction in order to comply with state regulatory provisions. The preparation and submission of this Plan of Correction does not constitute an admission of fault or liability on the part of Atria South Hills or an agreement by Atria South Hills regarding the truth or accuracy of the facts alleged or conclusions drawn.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
BEVERLY A BOWSER, ADMINISTRATOR	7/17/14

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

The above plan of correction is approved as of 7/24/14
 (Date)

Plan of correction implementation status as of 7/24/14
 (Date)

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

The above plan of correction was approved by CBG
 (Initials)