



**MAILING DATE: October 4, 2019**

Mr. Craig Douglass  
Chief Operating Officer  
Mercy Life Center Corporation  
**Attn: Kimberly Munko**  
1200 Reedsdale Street  
Pittsburgh, Pennsylvania 15233

RE: Outlook Manor  
3560 Outlook Drive  
West Mifflin, Pennsylvania 15122  
License# 430080

Dear Mr. Douglass:

As a result of the Department's Bureau of Human Services Licensing inspection on August 6, 2019, of the above facility, the citations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read "Janine Wenzig", written in a cursive style.

Janine Wenzig  
Human Services Licensing Supervisor

Enclosure  
Violation Report

# Violation Report

OCT 01 2019

## Facility Information

Name: *OUTLOOK MANOR*  
Address: *3560 OUTLOOK DRIVE,, WEST MIFFLIN, PA 15122*  
County: *ALLEGHENY* Region: *WESTERN*

WEST MICHIGAN HEALTH CARE  
Program Services Licensing  
License Number: *43008*

## Administrator

Name: *Michelle Jamison* Phone: *4123260012* Email: *mjamison@pittsburghmercy.org*

## Legal Entity

Name: *MERCY LIFE CENTER CORPORATION*  
Address: *1200 REEDSDALE STREET, PITTSBURGH, PA, 15233*

## Certificate(s) of Occupancy

Type: *C-2 LP* Date: Issued By:

## Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *12* Working Staff: *9*

## Inspection

Type: *Partial* BHA Docket #: Notice: *Unannounced*  
Reason: *Complaint*

## Inspection Dates and Department Representative

*08/06/2019 - On-Site: Josh Hoover*

## Resident Demographic Data as of Inspection Dates

### General Information

License Capacity: *12* Residents Served: *12*

### Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

### Hospice

Current Residents: *NA*

### Number of Residents Who:

Receive Supplemental Security Income: *9* Are 60 Years of Age or Older: *8*  
Diagnosed with Mental Illness: *12* Diagnosed with Intellectual Disability: *7*  
Have Mobility Need: *0* Have Physical Disability: *2*

23b - Instrumental Activities of Daily Living Assistance

WINDY HILL AREA AGENCY ON AGING  
COURTNEY WALKER, LICSW

Regulations

2600.

23.b. A home shall provide each resident with assistance with IADLs as indicated in the resident's assessment and support plan.

Description of Violation

The support plan, dated 10/17/2018, for resident #1, who is diagnosed with bilateral deafness, indicates that "an on-site staff who knows American Sign Language (ASL) will be available during his waking hours." However, there are no ASL proficient staff members on-site on Sunday through Tuesday and no ASL proficient staff members on-site between 6pm and 11pm on Wednesday through Saturday. Also, the support plan for resident #1 indicates that the resident will be transported to attend programs at the Center for Hearing and Deaf services (HDS) twice a week; however, the resident stopped attending HDS programming more than 6 months ago and began attending programming at Milestone Services. During June 2019, the home stopped providing transportation to these services and failed to contact resident #1's guardian about this decision or provide a reason for terminating this service.

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.)

\*Resident no longer has a support plan, the plan in question expired in 2011 and was not updated by past Supervisor. Support plan is no longer used.

\*Resident no longer requires ASL services during all waking hours. ASL personnel will provide Resident with services 4 out 7 days a week to support his needs. This change was added to Resident's current RASP plan. Resident's Guardian was made aware of this change.

\*Resident did attend programming at (HDS) Hearing and Deaf services 2 years ago, at that time the funding was cut and Resident unable to return. Outlook's past Supervisor did not update the RASP plan to indicate this change. Resident is currently not attending Milestone Services at this time due to the level of resident's participation. Outlook will continue to look for other services that may fit Resident. Outlook will provide transportation for any future services for Resident. This change has been added to RASP. Resident's Guardian was made aware of this change.

Legal Entity Representative The administrator will ensure all resident support plans are updated as residents' needs change. -  
JRW 10/1/19

  
Signature


Michelle Jamison  
Printed Name and Title

9/16/19  
Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 10/1/19  
(Date)

Plan of correction Implementation status as of 10/1/19  
(Date)

The above plan of correction was approved by   
(Initials)

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

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227c - Support Plan Revision

Regulations

2600.

227.c. The support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment.

Description of Violation

The support plan for resident #1, dated 10/17/2018, does not address the resident's need for total staff assistance for the purchase, storage, and distribution of tobacco products. Interviews indicate that staff must assist resident #1 with purchasing cigarettes, store the cigarettes to prevent other residents from stealing cigarettes and/or exploiting resident #1's generous nature and cognitive needs, and distribute cigarettes to resident #1 to prevent the resident from running out of cigarettes before he can purchase more.

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.)

227.c.

- (1) Resident's updated RASP plan indicates the process for Resident's tobacco purchases, storage, and distribution to include the following:
- (2) Outlook staff will work with Resident to establish his tobacco needs. Resident is agreeable to working with staff to use his ASL to ask/request his cigarettes hourly during the day.
- (3) Resident along with the assistance of his ASL personel, is agreeable to to having Outlook staff keep extra cigarettes in a safe place (Cabinet behind staff area) and he can request them at anytime. Resident's Gaurdian was made of this change (See updated RASP).

The administrator will ensure all resident support plans are updated as residents' needs change. - JRW 10/1/19

Legal Entity Representative



Signature

Michelle Jamison

Printed Name and Title

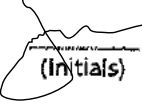
9/14/19

Date

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The above plan of correction is approved as of 10/1/19  
(Date)

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