



SENT VIA EMAIL: bmcquaide@integracare.com

MAILING DATE: March 10, 2020

Ms. Loriann Putzier
President/CEO
Tithonus Mt. Lebanon LP
C/O Integracare Group
6600 Brooktree Court, Suite 1000
Wexford, Pennsylvania 15090

RE: The Pines of Mt. Lebanon
1537 Washington Road
Pittsburgh, Pennsylvania 15228
Certificate #: 443610

Dear Ms. Putzier:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on February 10, 2020, 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 that reads "Jon B. Kimberland".

Jon Kimberland
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: *THE PINES OF MT. LEBANON*

License Number: *43361*

Address: *1537 WASHINGTON ROAD,, PITTSBURGH, PA 15228*

County: *ALLEGHENY*

Region: *WESTERN*

Administrator

Name: *Belinda McQuaide*

Phone: *4123414400*

Email: *bmcquaide@INTEGRACARE.COM*

Legal Entity

Name: *TITHONUS MT. LEBANON LP*

Address: *6600 BROOKTREE COURT SUITE 1000, C/O INTEGRACARE CORP, WEXFORD, PA, 15090*

Certificate(s) of Occupancy

Type: *C-2 LP*

Date:

Issued By:

Staffing Hours

Resident Support Staff: *0*

Total Daily Staff: *57*

Waking Staff: *43*

Inspection

Type: *Partial*

BHA Docket #:

Notice: *Unannounced*

Reason: *Incident*

Inspection Dates and Department Representative

02/10/2020 - On-Site: Scott Klein, Cindy Mulick

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *112*

Residents Served: *39*

Secured Dementia Care Unit

In Home: *Yes*

Area: *MEMORY SUPPORT*

Capacity: *18*

Residents Served: *5*

Hospice

Current Residents: *3*

Number of Residents Who:

Receive Supplemental Security Income: *0*

Are 60 Years of Age or Older: *39*

Diagnosed with Mental Illness: *3*

Diagnosed with Intellectual Disability: *0*

Have Mobility Need: *18*

Have Physical Disability: *3*

227g -Support Plan Signatures

Regulations

2600.

227.g. Individuals who participate in the development of the support plan shall sign and date the support plan.

Description of Violation

Resident #1's support pan, dated 12/29/19, was not signed by staff person completing the support plan.

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 Attached,

See Pages 2A and 2B of 2

Legal Entity Representative

Belinda McQuaide
Signature

Belinda McQuaide, 3/02/2020
Printed Name and Title Interim Executive Date
Operations Officer

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

The above plan of correction is approved as of 3/2/2020
(Date)

Plan of correction implementation status as of 3/2/2020
(Date)

- Implemented
- Not Implemented

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

Community Name: The Pines of Mt. Lebanon

License Number: 43361

Date of Visit: 2/10/2020

Date of Submission: 03/02/2020

1. Violation Review: 2600.227.g. Individuals who participate in the development of the support plan shall sign and date the support plan.
2. Violation Interpretative Statement:
Resident #1's support plan, dated 12/29/2019, was not signed by staff person completing the support plan.
3. Review the benefit of the Regulation, per RCG:
All staff persons who participate in the development of the plan must sign the plan. Having individuals who participate in the development of the support plan sign and date the support plan provides a record of who participated in the development of the support plan for future reference purposes.
4. Description of the Repair of the Immediate Problem:
The staff member that developed the support plan was contacted and the support plan now reflects the staff member's signature and date of sign. See attached.
5. Determine / document the Root Cause of the Violation:
Lack of process to ensure compliance with 2600.227.g. (primarily monitoring)
6. Detail Action Steps / System Developed to prevent future occurrence:
 - a. Teaching or Training
The Director of Wellness received re-education on the requirements of 2600.227.g. The LPN Charge Nurse will also receive training in the requirement. Documentation of training will be maintained. Target date is 3/10/2020.
 - b. On-going Monitoring
To establish the extent of compliance, all support plans will be audited for completeness and for the condition identified on the visit relating to 2600.227.g. Any discrepancies will be documented, and those which are correctable, will be corrected. Target date is 3/16/2020.

Once the status of support plan completeness is established, the Director of Wellness will review quarterly support plans and support plans for new admissions and change of condition daily during the business week. The Executive Operations Officer will set a daily tickler to verify that any support plans newly introduced to the community are complete, and compliant with 2600.227.g. Target date is 3/16/2020 and on-going.

Authorized Signature Behrns J. Heavill

Date: 3/02/2020

7. Designated position responsible and specify target date for correction.

The Regional Wellness Specialist and the Director of Wellness will develop and conduct training on or before 3/10/2020.

The Director of Wellness will oversee an audit of the resident support plans for compliance with 2600.227.g. A record of the audit will be maintained.

The Director of Wellness will work to bring the current support plans into compliance, as necessary, by 3/16/2020.

The Director of Wellness will monitor the support plans of new admissions, quarterly renewals, and significant changes for compliance, daily as needed based on circumstance.

The Executive Operations Officer will verify that the verification is daily and will be reminded by Outlook calendar Tickler for next 60 days to establish the habit and routine of the DoW.

3/2/2020 

Authorized Signature 

Date: 3/02/2020