

Department of Human Services
Bureau of Human Service Licensing

August 11, 2020

JENNIFER VENZIN, ADMINISTRATOR
THE PALMS AT O'NEIL INC
1 GLENSHIRE LANE
MCKEESPORT, PA 15132

RE: THE PALMS AT O'NEIL
1 GLENSHIRE LANE
MCKEESPORT, PA, 15132
LICENSE/COC#: 43964

Dear Ms. Venzin,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 07/01/2020 of the above facility, the citations specified on the enclosed Licensing Inspection Summary (LIS) were found.

We have determined that your plan of correction is: Acceptable

All citations specified on the plan of correction must be corrected by the dates specified on the License Inspection Summary (violation report) and continued compliance with Department statutes and regulations must be maintained.

Sincerely,
Larry Mazza

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY**

Facility Information

Name: *THE PALMS AT O'NEIL* License #: *43964* License Expiration Date: *11/19/2020*
 Address: *1 GLENSHIRE LANE, MCKEESPORT, PA 15132*
 County: *ALLEGHENY* Region: *WESTERN*

Administrator

Name: *Jessica Venzin* Phone: *4126641000* Email: *jvenzin@oneilblvd.net*

Legal Entity

Name: *THE PALMS AT O'NEIL INC*
 Address: *1 GLENSHIRE LANE, MCKEESPORT, PA, 15132*
 Phone: *4126641000* Email: *jvenzin@oneilblvd.net*

Certificate(s) of Occupancy

Type: *I-1* Date: *10/22/2008* Issued By: *City of McKeesport*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *83* Waking Staff: *62*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint,Incident* Exit Conference Date: *07/15/2020*

Inspection Dates and Department Representative

07/01/2020 - On-Site: Michael Marini, Tom Smith

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *82* Residents Served: *65*

Secured Dementia Care Unit

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

Hospice

Current Residents: *4*

Number of Residents Who:

Receive Supplemental Security Income: *5* Are 60 Years of Age or Older: *62*
 Diagnosed with Mental Illness: *7* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *18* Have Physical Disability: *2*

Inspections / Reviews

07/01/2020 - Partial

Lead Inspector: *Michael Marini* Follow-Up Type: *POC Submission* Follow-Up Date: *07/30/2020*

Inspections / Reviews *(continued)*

8/11/2020 - POC Submission

Lead Reviewer: *Larry Mazza*

Follow-Up Type: *Document Submission*

Follow-Up Date: *08/15/2020*

225c - Additional Assessment

1. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

1. Annually.

Description of Violation

*Resident #1's most recent assessment was completed on 4/16/19.***Plan of Correction****Accept**

An assessment was completed outside the annual window on 5-1-20 due to the previous administrators interpretation of the covid relief licensing regulation suspension. The current administration will complete a entire review of all resident charts and update necessary documentation to comply with regulation 2600.225.c. The home will resume compliance as it did pre covid.

Completion Date: 08/20/2020