

Department of Human Services
Bureau of Human Service Licensing

February 22, 2021

██████████ FINANCE & LICENSING COORDINATOR
WHITEHALL CARE GROUP LLC
5101 NE 82ND AVENUE, SUITE 200
VANCOUVER, WA 98662

RE: WHITETAIL SPRINGS ALZHEIMER'S
SPECIAL CARE CENTER
3401 PROVOST ROAD
PITTSBURGH, PA, 15227
LICENSE/COC#: 45061

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/20/2020, 10/27/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Suzy Quinn

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: WHITETAIL SPRINGS ALZHEIMER'S SPECIAL CARE CENTER **Licen e #:** 45061 **Licen e Expiration Date:** 04/01/2021
Addr e : 3401 PROVOST ROAD, PITTSBURGH, PA 15227
County: ALLEGHENY **Region:** WESTERN

Administrator

Name: [REDACTED] **Phone:** 4128843033 **Email:** [REDACTED]

Legal Entity

Name: WHITEHALL CARE GROUP LLC
Address: 5101 NE 82ND AVENUE, SUITE 200, VANCOUVER, WA, 98662
Phone: 4128843033 **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I-2 **Date:** 08/14/2019 **Issued By:** Whitehall Borough

Staffing Hours

Re ident Support Staff: **Total Daily Staff:** 66 **Waking Staff:** 50

Inspection

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint **Exit Conference Date:** 10/27/2020

Inspection Dates and Department Representative

10/20/2020 - On-Site: [REDACTED]
10/27/2020 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 66 **Residents Served:** 33

Secured Dementia Care Unit

In Home: Yes **Area:** Entire Facility **Capacity:** 66 **Residents Served:** 34

Hospice

Current Re ident : 0

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 33
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 33 **Have Physical Disability:** 0

Inspections / Reviews

10/20/2020 - Partial

Lead Inspector: [REDACTED] Follow Up Type: *POC Submission* Follow-Up Date: *12/09/2020*

1/22/2021 POC Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *02/07/2021*

2/22/2021 - Document Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Not Required*

224a - Preadmission Screen Form

1. Requirements

2600.

- 224.a. A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

Description of Violation

Resident #2's preadmission screening form, dated 06/23/20, does not include a determination that the needs of the resident can be met by the services provided by the home.

Plan of Correction**Accept**

During a complaint visit on 10/20/20 and subsequent chart review it was determined that a preadmission screening form did not include a determination that the needs of the resident could be met by the services provided by the community.

Per 224.a.- All preadmission screenings will be reviewed by the Healthcare Services Director/Designee to ensure that all Preadmission Screening forms are complete and comprehensive. The HSD will ensure and determine that all areas of the form are complete and accurate to ensure that the community/home is able to provide services for the needs of the residents.

This will be accomplished by an audit that will be conducted by the HSD/Designee to ensure that all current PreAdmission Screenings are complete and comprehensive.

An audit for all resident move-ins/PreAdmission Screening forms will be conducted for 2 months, to ensure that all documentation on the form is complete and resident's needs can be met by the community. This audit will be conducted by the HSD/Designee and signed off with each admission. Historical audit of all current resident will commence this day of 01/07/2021 and will be completed 03/04/2021. All documentation/audits will be attached and sent via SansWrite upon completion and/or at the request of Department of Human Services.

Completion Date: 03/04/2021

Document Submission**Implemented**

sent

231b - Medical Evaluation

1. Requirements

2600.

- 231.b. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner, documented on a form provided by the Department, within 60 days prior to admission. Documentation shall include the resident's diagnosis of Alzheimer's disease or other dementia and the need for the resident to be served in a secured dementia care unit.

Description of Violation

Resident #1 was admitted to the secured dementia care unit (SDCU) on [REDACTED] However, [REDACTED] initial medical evaluation, dated 10/2/20, does not indicate the need for the resident to be served in a secured dementia care unit.

231b - Medical Evaluation *(continued)***Plan of Correction****Accept**

upon review of documentation on a visit on 10/20/20, it was discovered that a resident was admitted to the community and that the initial medical evaluation, date 10/02/20 did not indicate that the resident needed to be served in a secured dementia care unit. The document in question was completed/amended per the Healthcare Services Director who is an Registered Nurse and the physician was notified.

Per 231.b.- A review of all current DME documentation will be reviewed to ensure that all forms are completed and appropriate. This will occur today 01072021.

Moving forward all DME's will be audited for completion and accuracy of the SCDU documentation for admissions. Audit will be conducted by Healthcare Services Director/Designee with every admission and will be conducted for two months with completion date to be March 4th 2021. All documentation/audits will be attached and sent via SansWrite upon completion and/or at the request of Department of Human Services.

Completion Date: 03/04/2021

Document Submission**Implemented**

sent

231c - Preadmission Screening

1. Requirements

2600.

231.c. A written cognitive preadmission screening completed in collaboration with a physician or a geriatric assessment team and documented on the Department's preadmission screening form shall be completed for each resident within 72 hours prior to admission to a secured dementia care unit.

Description of Violation

Resident #3 was admitted to the SDCU on [REDACTED] However, a written cognitive preadmission screening was not completed and documented on the Department's preadmission screening form.

Plan of Correction**Accept**

Upon review of medical records/documentation during a DHS visit on 10/20/20, it was noted that a residents medical record did not have a Preadmission Screening Form included in the chart.

Per 231.c. a review of all current medical records will occur 01072021, to ensure that all current medical records nclude Preadmission Screening tool.

An audit of all new admission documents will occur for the next two months to review all appropriate documentation s completed specifically focusing on the Preadmission Screening to ensure completeness and accuracy. This audit will conclude on 03/04/2021. All documentation/audits will be attached and sent via SansWrite upon completion and/or at the request of Department of Human Services.

Completion Date: 03/04/2021

Document Submission**Implemented**

sent