

Department of Human Services  
Bureau of Human Service Licensing

July 13, 2021

██████████ DIRECTOR OF PERSONAL CARE SERVICES  
VINCENTIAN DE MARILLAC  
5300 STANTON AVENUE  
PITTSBURGH, PA 15206

RE: SCHENLEY GARDENS  
3890 BIGELOW BOULEVARD  
PITTSBURGH, PA, 15213  
LICENSE/COC#: 44986

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/02/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Jon Kimberland

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing



## Inspections / Reviews

06/02/2021 - Partial

Lead Inspector: [REDACTED]

Follow Up Type: *POC Submission*Follow-Up Date: *06/17/2021*

6/10/2021 POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *06/15/2021*

7/13/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

141a 1-10 Medical Evaluation Information

1. Requirements

2600.

- 141.a. A resident shall have a medical evaluation by a physician, physician’s assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:
  - 1. A general physical examination by a physician, physician’s assistant or nurse practitioner.
  - 2. Medical diagnosis including physical or mental disabilities of the resident, if any.
  - 3. Medical information pertinent to diagnosis and treatment in case of an emergency.
  - 4. Special health or dietary needs of the resident.
  - 5. Allergies.
  - 6. Immunization history.
  - 7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
  - 8. Body positioning and movement stimulation for residents, if appropriate.
  - 9. Health status.
  - 10. Mobility assessment, updated annually or at the Department’s request.

Description of Violation

Resident #1’s annual medical evaluation, dated 4/7/21 was blank in multiple evaluation areas including:

- \* Resident #1’s height, weight, and temperature were blank.
- \* Resident #1’s medical information pertinent to the diagnoses was blank.
- \* Resident #1’s immunizations area was blank.
- \* Resident #1’s allergies area was blank.
- \* Resident #1’s ability to safely administer medication evaluation was blank.
- \* Resident #1’s overall health status area was blank.
- \* Resident #1’s cognitive functioning evaluation was blank.

Plan of Correction

Accept

On 6/2/21 RN Manager of Resident Services faxed a new DME for Resident #1 to [redacted] physician (see attached new completed DME for Resident #1 dated 6/2/21). Administrator provided training on regulation 141a to RN Manager of Resident Services on 6/10/21, who is responsible for ensuring timely, thorough completion of resident DME’s (see record of training). RN Manager of Resident Service (or designee) will audit 5 DME’s per week to check for any blank areas until all DME’s have been audited. The audit of the first five residents will be completed by 6/11/21. See attached blank audit form. Moving forward, all DME’s will be inspected for thorough completion upon receipt from the MD by the RN Manager of Resident Services or designee prior to scanning into the electronic health record.

Completion Date: 06/11/2021

Document Submission

Implemented

see attached - ongoing

225c - Additional Assessment

1. Requirements

2600.

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

- 3. At the request of the Department upon cause to believe that an update is required.

225c - Additional Assessment (continued)

**Description of Violation**

Resident #1's annual assessment, dated 5/28/21, did not include the resident's diagnoses indicated on the annual medical evaluation dated 4/7/21 to include:

- \* Bipolar I disorder.
- \* HLD (hyperlipidemia).

**Plan of Correction**

**Accept**

Annual assessment for resident #1 was updated with the additional two diagnoses on 6/2/21 during the inspection (see attached, updated RASP). Administrator provided training RN Manager of Resident Services on 6/10/21 regarding regulation 225 (see attached record of training). RN Manager of Resident Services will audit 5 DME's and their corresponding RASP's per week to check that all diagnoses are present and match on both forms until all have been audited (see attached blank audit form). The audit of the first five residents will be completed by 6/11/21. Upon admission, re-admission, annually, or occurrence of significant change that requires a new or updated DME and RASP, RN Manager of Resident Services (or designee) will compare the physician-signed DME (when uploading to EHR) to the RASP created at the facility to ensure that the two documents correlate. Updates to the RASP will occur at this time as needed.

Completion Date: 06/11/2021

**Document Submission**

**Implemented**

see attached - ongoing