

Department of Human Services  
Bureau of Human Service Licensing

July 1, 2021

██████████ OWNER  
TLC HEALTHCARE LLC  
801 ELM SPRING ROAD  
PITTSBURGH, PA 15243

RE: DUNLEVY MANOR  
2218 ROUTE 88  
DUNLEVY, PA, 15432  
LICENSE/COC#: 44754

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,  
Jody Garvey

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services  
Bureau of Human Service Licensing

June 15, 2021

██████████ OWNER  
TLC HEALTHCARE LLC  
801 ELM SPRING ROAD  
PITTSBURGH, PA 15243

RE: DUNLEVY MANOR  
2218 ROUTE 88  
DUNLEVY, PA, 15432  
LICENSE/COC#: 44754

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 06/02/2021 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,  
Jody Garvey

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:** DUNLEVY MANOR **License #:** 44754    **License Expiration Date:** 08/25/2021  
**Address:** 2218 ROUTE 88, DUNLEVY, PA 15432  
**County:** WASHINGTON **Region:** WESTERN

**Administrator**

**Name:** [REDACTED] **Phone:** 7243265611    **Email:** [REDACTED]

**Legal Entity**

**Name:** TLC HEALTHCARE LLC  
**Address:** 801 ELM SPRING ROAD, PITTSBURGH, PA, 15243  
**Phone:** 7243265611 **Email:** [REDACTED]

**Certificate(s) of Occupancy**

**Type:** C-2 LP **Date:** 06/20/1996    **Issued By:** L&I

**Staffing Hours**

**Resident Support Staff:** 0 **Total Daily Staff:** 15    **Waking Staff:** 11

**Inspection**

**Type:** Partial **Notice:** Unannounced    **BHA Docket #:**  
**Reason:** Complaint **Exit Conference Date:** 06/02/2021

**Inspection Dates and Department Representative**

06/02/2021 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 24 **Residents Served:** 11

**Secured Dementia Care Unit**

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

**Hospice**

**Current Residents:** 0

**Number of Residents Who:**

**Receive Supplemental Security Income:** 0 **Are 60 Years of Age or Older:** 11  
**Diagnosed with Mental Illness:** 0 **Diagnosed with Intellectual Disability:** 0  
**Have Mobility Need:** 4 **Have Physical Disability:** 0

**Inspections / Reviews**

06/02/2021 - Partial

**Lead Inspector:** [REDACTED] **Follow-Up Type:** POC Submission    **Follow-Up Date:** 06/16/2021

Inspections / Reviews *(continued)*

6/15/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow Up Type: *Document Submission*

Follow-Up Date: *06/19/2021*

7/1/2021 Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

42s - Privacy

1. Requirements

2600.

42.s. A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.

Description of Violation

On 6/2/21 at 3:00 p.m., staff person A showed a picture of resident #1 taken and stored on the staff person's personal cell phone to an Agent of the Department.

Plan of Correction

Accept

This staff member said [redacted] was not aware that you cannot have pictures of residents on phone to show proof of a behavior. The picture was immediately deleted and a Confidentiality/Privacy/Residents rights training was conducted on June 8th 2021 to address this issues and as well as all Resident rights. This staff member was also given a Growth and Change disciplinary action because [redacted] should know this due to how many times [redacted] has sat through a resident rights training. and residents rights will be addressed at each Quarterly Quality Management to ensure everyone knows them and can ask questions if unsure. The Administrator and or Designee will continue to check weekly that Confidentiality and residents rights are being followed.

Completion Date: 06/08/2021

Document Submission

Implemented

picture was deleted immediately and training was completed. ( all attached)

225c - Additional Assessment

1. Requirements

2600.

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

2. If the condition of the resident significantly changes prior to the annual assessment.

Description of Violation

Resident #1's most recent assessment dated 9/1/20, indicates that the resident has a minimal behavioral or cognitive need in the areas of irritability and judgement. However, multiple staff interviews indicate that the resident exposes himself in common areas of the home, defecates in cups, napkins and his pillow case, and plays with it, smears feces on wall and on staff, and is physically aggressive with staff members.

Plan of Correction

Accept

The assessment was immediately changed to match the behaviors. (attached). Then a new Support plan was completed on 6/2/21 to address all issues and due to hospice being added.(attached) This was an over sight because [redacted] behaviors were addressed on the RASP in other areas just not on this one area. It was addressed in agitation and aggression. Administrator or designee will continue to updated the assessments as beha iors change within 5 days n all areas on the rasp and will do a monthly audit to make sure they do not miss anything. This audit will happen with all residents that have had any significant changes though out the month to make sure all areas on the RASP are updated to give an accurate reflection of all behaviors. Another administrator came in on 6/5/21 and gave the current administrator and designee a training in Assessment/Support plans to address all the issues and how to update all plans.

Completion Date: 06/02/2021

225c - Additional Assessment *(continued)***Document Submission****Implemented**

*support plan was updated and a new one was completed on 6/2/21. all forms were updated. (attached.)*