

Department of Human Services
Bureau of Human Service Licensing

March 3, 2022

[REDACTED]
BROOKDALE LIVING COMMUNITIES OF PENNSYLVANIA-ML INC
[REDACTED]

RE: BROOKDALE MT. LEBANON
1050 MCNEILLY ROAD
PITTSBURGH, PA, 15226
LICENSE/COC#: 43236

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/26/2022, 01/28/2022 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

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

Facility Information

Name: *BROOKDALE MT. LEBANON* License #: *43236* License Expiration: *09/11/2022*
Address: *1050 MCNEILLY ROAD, PITTSBURGH, PA 15226*
County: *ALLEGHENY* Region: *WESTERN*

Administrator

Name: [REDACTED] Phone: *4123432200* Email: [REDACTED]

Legal Entity

Name: *BROOKDALE LIVING COMMUNITIES OF PENNSYLVANIA-ML INC*
Address: *6737 W. WASHINGTON ST, STE.2300, MILWAUKEE, WI, 53214*
Phone: *4123432200* Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *03/02/2001* Issued By: *L & I*
Type: *Other* Date: *07/31/2001* Issued By: *Mt. Bebanon*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *63* Waking Staff: *47*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Incident* Exit Conference Date: *02/03/2022*

Inspection Dates and Department Representative

01/26/2022 - On-Site: [REDACTED]
01/28/2022 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *80* Residents Served: *44*

Secured Dementia Care Unit

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

Hospice

Current Residents: *1*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *44*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *19* Have Physical Disability: *0*

Inspections / Reviews

01/26/2022 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *02/27/2022*

02/28/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *03/02/2022*

03/03/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

225a - Assessment 15 Days

1. Requirements

2600.

225.a. A resident shall have a written initial assessment that is documented on the Department’s assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

Description of Violation

Resident #1’s initial assessment was completed on [REDACTED]. The homes assessment form did not have an assessment for “Supervision need”. It was not included as a part of the home’s assessment tool, therefore, there was no assessment completed for the resident’s “Supervision” needs.

Plan of Correction

Accept

.The following is the Plan of Correction for Brookdale Mt Lebanon regarding the Statement of Deficiency dated February 17, 2022 for the partial inspection/ incident follow-up survey on January 26, 2022 and January 28, 2022. This Plan of Correction is not to be construed as an admission of or agreement with the findings and conclusions in the Statement of Deficiencies, or any related sanction or fine. Rather, it is submitted as confirmation of our ongoing efforts to comply with statutory and regulatory requirements. In this document, we have outlined specific actions in response to identified issues. We have not provided a detailed response to each allegation or finding, nor have we identified mitigating factors. We remain committed to the delivery of quality health care services and will continue to make changes and improvement to satisfy that objective.

Regulation 2600.225.a

Immediately- Resident#1 is no longer in the community.

February 18, 2022-Health & Wellness Director and/or designee initiated an audit of resident initial assessments for documentation of supervision needs. Resident assessments will be updated to include supervision needs as indicated.

February 21, 2022- District Director Clinical Services retrained the appropriate clinical staff regarding inclusion of documentation of need for supervision in the initial assessment.

Going forward- The Health and Wellness Coordinator or designee will review initial assessments as they are completed for documentation of supervision needs for 3 months. Changes in level of supervision will be updated in the assessments and support plan as warranted.

The Health and Wellness Director will determine if any further action is warranted based on the results of the audit.

Evidence: In-service attendance sheet

Completion Date- March 21, 2022

Document Submission

Implemented

see training document attached