

Department of Human Services
Bureau of Human Service Licensing

July 6, 2022

[REDACTED]

TITHONUS MT. LEBANON LP

[REDACTED]

RE: THE PINES OF MT. LEBANON
1537 WASHINGTON ROAD
PITTSBURGH, PA, 15228
LICENSE/COC#: 43361

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/19/2022, 05/31/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
[REDACTED]

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: *THE PINES OF MT. LEBANON* License #: *43361* License Expiration: *06/03/2023*
Address: *1537 WASHINGTON ROAD, PITTSBURGH, PA 15228*
County: *ALLEGHENY* Region: *WESTERN*

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: *TITHONUS MT. LEBANON LP*
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *51* Waking Staff: *38*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint* Exit Conference Date: *05/31/2022*

Inspection Dates and Department Representative

05/19/2022 - On-Site: [REDACTED]
05/31/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *112* Residents Served: *34*

Secured Dementia Care Unit

In Home: *Yes* Area: *18* Capacity: *SDCU* Residents Served: *6*

Hospice

Current Residents: *7*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *334*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *17* Have Physical Disability: *1*

Inspections / Reviews

05/19/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/19/2022*

06/17/2022 - POC Submission

Inspections / Reviews (*continued*)

Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/23/2022*

06/22/2022 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *06/30/2022*

07/06/2022 - Document Submission

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

187b - Date/Time of Medication Admin.

1. Requirements

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

Resident #1 is prescribed [redacted]. According to resident #1's [redacted] log, this medication was administered to resident #1 on [redacted] 22 at [redacted] pm; however, the resident's May 2022 medication administration record (MAR) does not include the initials of the staff person who administered the medication to resident #1 on [redacted] /22 at [redacted] pm.

Plan of Correction

Accept

All staff were re-educated on 6/1/22 to proper documentation of medications, exceptions, glucose readings, and how to print the dashboard at end of shift.

All staff are to print dashboards to ensure everything was charted on prior to leaving there shift.

RWD will monitor dashboard daily to ensure compliance.

RWD will educate staff to narcotic policies and procedures this will occur June 17th through June 30th to capture all staff. Documentation of education will be kept.

Please see attached.

Completion Date: 06/30/2022

Document Submission

Implemented

All staff were re-educated on 6/1/22 to proper documentation of medications, exceptions, glucose readings, and how to print the dashboard at end of shift.

All staff are to print dashboards to ensure everything was charted on prior to leaving there shift.

RWD will monitor dashboard daily to ensure compliance.

RWD will educate staff to narcotic policies and procedures this will occur June 17th through June 30th to capture all staff. Documentation of education will be kept.

Please see attached.

187d - Follow Prescriber's Orders

1. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #2 is prescribed blood glucose checks 4 times daily with Humalog 100u/ml sliding scale coverage; however, according to resident #2's glucometer, the resident's blood glucose was not checked on the following dates and times:

- [redacted] 22 at [redacted] pm
- [redacted] /22 at [redacted] pm
- [redacted] 22 at [redacted] pm
- [redacted] /22 at [redacted] pm

Resident #2 is prescribed blood glucose checks 4 times daily with Humalog 100 U/ML Kwikpen sliding scale coverage as follows: < 140=0U; 141-180=1U; 181-220=2U; 221-260=3U; 261-300=4U; 301-340=5U; 341-400=6U; >400=call MD.

187d - Follow Prescriber's Orders (continued)

On [REDACTED]/22 at [REDACTED] pm, resident #2's blood glucose was 145 and should of had 1 unit of insulin administered; however, according to resident #2's May 2022 MAR, no insulin was administered to the resident on [REDACTED] 22 at [REDACTED] pm.

There is no glucose reading present on resident #2's glucometer on [REDACTED]/22 at [REDACTED] pm; however, resident #2's May 2022 MAR indicates 2 units of insulin were administered to the resident on [REDACTED]/22 at [REDACTED] pm.

On [REDACTED]/22 at [REDACTED] pm, resident #2's blood glucose was [REDACTED] and should of had 1 unit of insulin administered; however, according to resident #2's May 2022 MAR, 2 units of insulin were administered to the resident on [REDACTED]/22 at [REDACTED] pm.

According to resident#2's May 2022 MAR, the following medications were not administered to resident #2 on [REDACTED]/22:

- The [REDACTED] pm dose of [REDACTED]
- The [REDACTED] pm dose of [REDACTED]
- The [REDACTED] pm dose of [REDACTED]

Resident #3 is prescribed blood glucose checks twice daily; however, according to resident #3's glucometer, the resident's blood glucose was not checked on [REDACTED] 22 at [REDACTED] am or on [REDACTED]/22 at [REDACTED] pm.

REPEAT VIOLATION: 2/23/2022, et. al.

Plan of Correction**Directed**

All staff were re-educated on 6/1/22 to proper documentation of medications , exceptions, glucose readings, and how to print the dashboard at end of shift. (DIRECTED: Documentation of the education shall be kept. [REDACTED] 6/22/22).

All staff are to print dashboards to ensure everything was charted on prior to leaving there shift.

RWD will monitor dashboard daily to ensure compliance.

A glucose monitor is completed daily by 11-7 shift to ensure compliance. Please see attached.

11-7 shift to communicate any discrepancies via communication book.

RWD is to review communication book daily and sign off to ensure compliance.

RWD is to review communication book and sign off to ensure compliance.

RWD will conduct observations of 3 med passes per staff member who administers meds with an emphasis on glucose testing and insulin administration. This will occur June 17th through June 30th in order to capture all staff.

Documentation will be kept.

RWD will review 4 MARS per week to ensure compliance. (DIRECTED: The 4 MAR reviews shall begin within 48 hours of receipt of the plan of correction. The MAR reviews shall include ensuring all medications are administered as prescribed and ensure resident blood sugars are completed in accordance with prescribers' orders, accurately documented on the resident MAR's and the proper amount of insulin is administered in accordance with prescribers' orders. Documentation of the MAR reviews shall be kept. [REDACTED] 6/22/22).

Completion Date: 06/30/2022

Document Submission**Implemented**

All staff were re-educated on 6/1/22 to proper documentation of medications , exceptions, glucose readings, and how to print the dashboard at end of shift. (DIRECTED: Documentation of the education shall be kept. [REDACTED] 6/22/22).

187d - Follow Prescriber's Orders (continued)

All staff are to print dashboards to ensure everything was charted on prior to leaving there shift.

RWD will monitor dashboard daily to ensure compliance.

A glucose monitor is completed daily by 11-7 shift to ensure compliance. Please see attached.

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