

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

December 26, 2023

[REDACTED], VICE PRESIDENT OF HEALTHCARE OPERATIONS  
NORTHLAND HEIGHTS LLC  
[REDACTED]

RE: NORTHLAND HEIGHTS  
4859 MCKNIGHT ROAD  
PITTSBURGH, PA, 15237  
LICENSE/COC#: 45084

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/21/2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,  
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: *NORTHLAND HEIGHTS* License #: *45084* License Expiration: *01/24/2024*  
 Address: *4859 MCKNIGHT ROAD, PITTSBURGH, PA 15237*  
 County: *ALLEGHENY* Region: *WESTERN*

**Administrator**

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

**Legal Entity**

Name: *NORTHLAND HEIGHTS LLC*  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-1* Date: *01/21/2020* Issued By: *Ross Township*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *53* Waking Staff: *40*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Complaint, Fine* Exit Conference Date: *11/21/2023*

**Inspection Dates and Department Representative**

*11/21/2023 - On-Site* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *123* Residents Served: *35*

**Special Care Unit**  
 In Home: *Yes* Area: *1st floor* Capacity: *19* Residents Served: *7*

**Hospice**  
 Current Residents: *3*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *36*  
 Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *18* Have Physical Disability: *1*

**Inspections / Reviews**

**11/21/2023 Partial**  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *12/15/2023*

**12/18/2023 - POC Submission**  
 Submitted By: [REDACTED] Date Submitted: *12/25/2023*  
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *12/25/2023*

Inspections / Reviews *(continued)*

12/26/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/25/2023

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

85a Sanitary conditions

1. Requirements

2800.  
85.a. Sanitary conditions shall be maintained.

Description of Violation

On 11/21/2023 at 10:15 am, there was a strong pervasive odor of urine in room #210 and the adjoining bathroom.

Plan of Correction

Accept [REDACTED] - 12/18/2023)

\* Room # 210 was immediately deep cleaned to include the adjoining bathroom on 11/22/23 by housekeeping staff, eliminating the odor of urine. The mattress was replaced on 11/22/23 by the Maintenance Director.

\* All staff were in-serviced on 12/8/23 by the Administrator on maintaining sanitary conditions throughout the building and resident rooms. This includes the removal of soiled clothing, bagging soiled briefs and daily rounds to ensure sanitary conditions are met. Staff were educated on reporting rooms that need additional housekeeping attention.

\* Daily monitoring and attention to any findings for pervasive odors will occur by care staff of all memory care rooms and bathrooms beginning on 12/18/23 through January 30th, 2024. The checklist will be maintained by the Administrator for DHS review.

Licensee's Proposed Overall Completion Date: 12/18/2023

Implemented [REDACTED] - 12/26/2023)

184a Resident meds labeled

2. Requirements

2800.  
184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:  
4. The prescribed dosage and instructions for administration.

Description of Violation

Resident #1 is prescribed [REDACTED]

The pharmacy label for this medication was incomplete and did not include the following portion of the sliding scale:

[REDACTED]

[REDACTED]

Plan of Correction

Accept [REDACTED] - 12/18/2023)

\* On 11/21/23 the Administrator added a change order sticker to Resident #1's incomplete medication label. This change sticker directs staff the MAR for the sliding scale as ordered by the physician due to the pharmacy label being incomplete.

\* All insulin labels have been checked by the DON on 12/18/23 to ensure that the pharmacy label includes the prescribed dosage and instructions for administration.

\* All Med Techs and LPN staff will be educated by 12/15/23 by the DON regarding the correct labeling of

184a Resident meds labeled (continued)

prescribed dosage and instructions for administration from the pharmacy. Incomplete labeling will be corrected with a change of order sticker referring staff to the MAR. Pharmacy was notified on 12/11/23 by QA Director of incomplete labeling.

\* DON will perform weekly audits on medication labels beginning 12/18/23 through the month of January and monthly thereafter ~~until March 2024.~~ 12/18/23

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Proposed Overall Completion Date: 12/18/2023

Licensee's Proposed Overall Completion Date: 12/18/2023

Implemented [redacted] - 12/26/2023)

185a Storage procedures

3. Requirements

2800.

185.a. The residence shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident #2 is prescribed [redacted], give one tablet by mouth every evening. On [redacted] this medication was not available in the residence for the evening administration.

Repeat Violation 4/4/2023 et al

Plan of Correction

Accept [redacted] - 12/18/2023)

Resident #2's prescribed [redacted] was ordered by the Med Tech on [redacted]. The pharmacy delivered the medication for the evening administration.

DON will perform weekly audits on medication availability beginning 12/18/23 through the month of January and monthly thereafter until March 2024.

Licensee's Proposed Overall Completion Date: 12/18/2023

Implemented [redacted] 12/26/2023)