

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

October 23, 2024

[REDACTED]  
WG SOUTH HILLS SH LLC

[REDACTED]  
PRIORITY LIFE CARE  
[REDACTED]

RE: CELEBRATION VILLA OF SOUTH  
HILLS  
5300 CLAIRTON BOULEVARD  
PITTSBURGH, PA, 15236  
LICENSE/COC#: 44284

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/05/2024 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: CELEBRATION VILLA OF SOUTH HILLS License #: 44284 License Expiration: 10/16/2024  
 Address: 5300 CLAIRTON BOULEVARD, PITTSBURGH, PA 15236  
 County: ALLEGHENY Region: WESTERN

**Administrator**

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

**Legal Entity**

Name: WG SOUTH HILLS SH LLC  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 88 Waking Staff: 66

**Inspection Information**

Type: Partial Notice: Unannounced BHA Docket #:  
 Reason: Complaint, Incident Exit Conference Date: 09/17/2024

**Inspection Dates and Department Representative**

09/05/2024 On Site [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 139 Residents Served: 85

Secured Dementia Care Unit  
 In Home: No Area: Capacity: Residents Served:

Hospice  
 Current Residents: 11

Number of Residents Who:  
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 85  
 Diagnosed with Mental Illness: 15 Diagnosed with Intellectual Disability: 1  
 Have Mobility Need: 3 Have Physical Disability: 1

**Inspections / Reviews**

09/05/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 10/12/2024

10/16/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: 10/22/2024  
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 10/22/2024

Inspections / Reviews *(continued)*

10/23/2024 - Document Submission

Submitted By [REDACTED]

Date Submitted: 10/22/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

16c - Written Incident Report

1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department’s personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On [REDACTED], at approximately 12:30 a.m. resident [REDACTED] was found on the floor next to the bed. The resident was sent to the hospital for evaluation. The resident sustained a laceration above [REDACTED] eye which required treatment and a skin tear to the left elbow. The home did not report this incident to the Department.

Plan of Correction

Accept [REDACTED] - 10/16/2024)

In the event that an injury is sustain in which medical treatment is sought, staff will notify the DON of the sustain injury in which the ED will be consulted and the appropriate report will be completed within 24hrs to DHS. ED and DON will review incident report Daily. Staff will be trained on reporting incidents to DON or ED. Training will be conducted on 10.11.24 through 10.13.24

Licensee's Proposed Overall Completion Date: 10/11/2024

Implemented [REDACTED] 10/23/2024)