

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

December 17, 2025

[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 12/01/2025 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: 05/05/2026
 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

Type: C-2 LP Date: 03/08/1999 Issued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 110 Waking Staff: 83

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Complaint Exit Conference Date: 12/01/2025

Inspection Dates and Department Representative

12/01/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 139 Residents Served: 84

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

Hospice
 Current Residents: 3

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 84
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 26 Have Physical Disability: 0

Inspections / Reviews

12/01/2025 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 12/12/2025

12/09/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 12/17/2025
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 12/27/2025

Inspections / Reviews *(continued)*

12/17/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/17/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

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 [REDACTED]s significant change assessment, dated [REDACTED], indicated the resident was following with home health in the summary and determination section but did not indicate Gallagher Home Health Services as a formal support or identify the assessed care needs to be managed by Gallagher Home Health Services to include:

- Physical Therapy
- Occupational Therapy
- Wound Care

Additionally, resident [REDACTED] assessment did not include the special health or dietary need for wound care that was documented on the resident's medical evaluation dated [REDACTED]

REPEAT VIOLATION [REDACTED]

Plan of Correction

Accept ([REDACTED] 12/09/2025)

Initial: Resident [REDACTED] no longer resides in the community. On 12/1/25, the Assistant Director of Nursing completed an audit of all current residents, to identify formal support and identify the assessed care needs to be managed. All current residents with wounds were identified to ensure all special health or dietary needs for wound care were documented on the assessment and identify who the care needs will be managed by.

Training: On 12/1/25 the Director of Nursing, Assistant Director of Nursing, Resident Care Coordinator were educated on regulation 2600. 225c, by the Regional Director of Clinical Services. ? Training records will be kept in accordance with Regulation 2600.65i.?

Ongoing: Effective 12/1/25 the Director of Nursing/Assistant Director of Nursing will review weekly home health, hospice, and therapy notes to ensure all special health or dietary needs for wound care are documented on the assessment and identify who the care needs will be managed by and how often. Results to be reviewed at monthly Quality Assurance.

Licensee's Proposed Overall Completion Date: 12/26/2025

Implemented [REDACTED] - 12/17/2025)