



SENT VIA EMAIL: schuetzda2@upmc.edu
grantd@upmc.edu

MAILING DATE: May 19, 2020

Ms. Debra Schuetz
Administrator
UPCM Senior Communities
Forbes Tower, Suite 10055B
200 Lothrop Street
Pittsburgh, Pennsylvania 15213

RE: Seneca Manor
5340 Saltsburg Road
Verona, Pennsylvania 15147
License #444990

Dear Ms. Schuetz:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on March 12, 2020, of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read "L. Mazza", written in a cursive style.

Larry Mazza
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

5/7/2020

Violation Report

Western Region Field Office
Bureau of Human Services Licensing

License Number: 44499

Facility Information

Name: *SENECA MANOR*
 Address: *5340 SALTSBURG ROAD, VERONA, PA 15147*
 County: *ALLEGHENY* Region: *WESTERN*

Administrator

Name: *Deborah Schuetz* Phone: *4127986000* Email: *GRANTD@UPMC.EDU*

Legal Entity

Name: *UPMC SENIOR COMMUNITIES*
 Address: *200 LOTHROP STREET, FORBES TOWER, SUITE 10055B, PITTSBURGH, PA, 15213*

Certificate(s) of Occupancy

Type: *I-2* Date: *04/14/2010* Issued By: *Municipality of Penn Hills*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *108* Waking Staff: *81*

Inspection

Type: *Full* BHA Docket #: Notice: *Unannounced*
 Reason: *Renewal*

Inspection Dates and Department Representative

03/12/2020 - On-Site: Ashley Roser, Scott Klein

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *100* Residents Served: *70*

Special Care Unit

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

Hospice

Current Residents: *5*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *70*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *38* Have Physical Disability: *0*

81b Resident equip – good repair

Requirements

2800.

81.b. Wheelchairs, walkers, prosthetic devices and other apparatus used by residents must be clean, in good repair and free of hazards.

Description of Violation

At 10:50 a.m., no protective covers were present on resident #5's bilateral bed enablers, which have multiple openings that measure approximately 3-4" wide, which pose a risk of limb entanglement.

Plan of Correction (POC)

(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

A cover was placed on #5's bilateral bed enablers immediately. All bed enablers have been checked for covers and all are now in compliance.

Enablers will be checked weekly by housekeeping staff during linen change and to enter a work order if cover is off.

*this is ongoing.

Legal Entity Representative

[Signature] RABW, ALCA
Signature

Debra Schuetz Admin 5.7.20
Printed Name and Title Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 5/8/2020
(Date)

Plan of correction implementation status as of 5/13/2020
(Date)

The above plan of correction was approved by *[Signature]*
(Initials)

Implemented
 Not Implemented

85a Sanitary conditions

Requirements

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

Description of Violation

At 1:40 p.m., a strong odor of urine was present in resident #2's living unit.

At 2:50 p.m., dried blood droplets were present on resident #1's One Touch Ultra 2 glucometer.

Plan of Correction (POC)

(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

Res #2 - The housekeeper will check the room daily for signs of odor. If odor is detected the room will be deodorized. Form will be initialed and dated upon completion.

Res #1 - Clinical staff has been educated regarding the cleaning of glucometers after each use. Sign in sheet attached. DRC will check glucometers randomly for cleanliness on a weekly basis for 4 weeks and then bi-weekly going forward.

* ongoing

Legal Entity Representative


 Debra Schuetz, ALBA
Signature

Debra Schuetz Admin. 5.7.20
Printed Name and Title Date

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101j7 Lighting/operable lamp

Requirements

2800.

101.j. Each resident shall have the following in the living unit:

- 7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

Resident #1's bedside lamp is inoperable.

Resident #2's bedside lamp is inoperable.


Resident #3's bedside lamp is approximately 5' from the resident's bed and cannot be turned on/off at bedside.

Plan of Correction (POC)

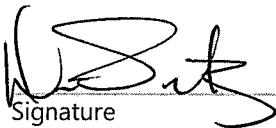
(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

All lamps were repaired immediately. Residents #1 and #2 lamps are working as seen in the attached pictures. Resident #3 has since passed away, however flashlights have been ordered to be used when lamps are out of reach (order attached). Going forward housekeepers will check all lamps during weekly routine cleaning. A flashlight will be given to any resident whose lamp is not working. A work order will be placed immediately upon discovery of a non functioning lamp.

Within 15 days of receipt of the plan of correction: All staff persons shall be educated on the requirement that each resident shall have an operable lamp or other source of lighting within reach of their bed. Documentation of the education shall be kept.

 5/13/20


Legal Entity Representative


Signature

Debra Schuch Admin 5.12.20
Printed Name and Title Date

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- Not Implemented

123b Emerg. procedures posted

Requirements

2800.

123.b. Copies of the emergency procedures as specified in § 2800.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the residence and a copy shall be kept.

Description of Violation


The home's emergency procedures posted in a binder at the front reception desk did not include the emergency procedures for the local municipality.

Plan of Correction (POC)

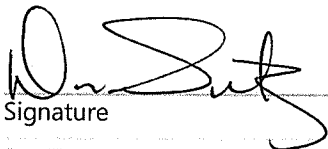
(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

The most recent EOP for Penn Hills was obtained from Chuck Miller, Emergency Management Coordinator. All 23 pages of the EOP are attached. A copy of the EOP has been placed in the binder on the front desk and another copy is in the Administrators office.

Immediately: A designated staff person shall check the front desk monthly to ensure the binder is posted in a conspicuous and public place.

5/13/20



Legal Entity Representative


Signature

Debra Schuck Admin. 5.12.20
Printed Name and Title Date

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