

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 396116	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 05/21/2025
NAME OF PROVIDER OR SUPPLIER Little Sisters of the Poor		STREET ADDRESS, CITY, STATE, ZIP CODE 1028 Benton Avenue Pittsburgh, PA 15212	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
<p>F 0600</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 27424</p> <p>Based on review of facility policy and documentation, staff and resident interview it was determined that the facility failed to protect resident from neglect for one of three residents (Resident R1).</p> <p>Findings include:</p> <p>Review of facility policy Abuse, Neglect, Mistreatment and Misappropriation of Resident Property dated November 2024 through November 2025, indicated: Neglect is the failure of the home, its employees, or service providers to provide goods and services to a Resident that are necessary to avoid physical harm, pain, mental anguish, or emotional distress</p> <p>Resident R1 was admitted to the facility on [DATE].</p> <p>Resident R1 MDS (minimum data set periodic assessment of resident needs) dated 4/14/25, indicated diagnosis of Parkinson's disease (a brain disorder that causes unintended or uncontrollable movements, such as shaking, stiffness, and difficulty with balance), bipolar disease (mental health condition causes extreme mood swings) and anxiety disorder.</p> <p>Review of facility documentation submitted to the state survey office dated 5/2/25, indicated</p> <p>Medical driver took 2 residents to AGH hospital for 2 different appointments, took one resident in hospital and went back to get Resident R1 out of the van when Medical Driver noticed he didn't have the lift up and tried to pull her back but she fell to the ground striking the left side. Resident R1 was immediately surrounded by paramedics and hospital staff and she was put into ER to be evaluated and treated.</p> <p>Review of facility documentation witness statement from Employee E1 Medical Driver indicated that the lift was not up and they confirmed that they failed to put the lift into the proper position.</p> <p>During an interview on 5/20/25, at 4:35 p.m. Director of Nursing (DON) confirmed that Employee E1 Medical Driver did fail to put the lift in the appropriate position, and Resident R1 did fall from the van.</p> <p>(continued on next page)</p>

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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<p>F 0600</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During an interview on 5/20/25, at 4:40 p.m. DON was informed that the facility failed to protect Resident R1 from neglect with the van lift not being in the appropriate position and Resident R1 falling from the van.</p> <p>28 Pa. Code 201.14(a) Responsibility of licensee</p> <p>28 Pa. Code 211.10 (a) (d) Resident care policies</p>		

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<p>F 0745</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>Provide medically-related social services to help each resident achieve the highest possible quality of life.</p> <p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** 27424</p> <p>Based on review of facility policy, clinical record review and resident and staff interview it was determined that the facility failed to provide medically related social services for one of three resident reviewed (Resident R1).</p> <p>Findings include:</p> <p>Resident R1 was admitted to the facility on [DATE].</p> <p>Resident R1 MDS (minimum data set periodic assessment of resident needs) dated 4/14/25, indicated diagnosis of Parkinson's disease (a brain disorder that causes unintended or uncontrollable movements, such as shaking, stiffness, and difficulty with balance), bipolar disease (mental health condition causes extreme mood swings) and anxiety disorder.</p> <p>Review of facility documentation submitted to the state survey office dated 5/2/25, indicated:</p> <p>Medical driver took 2 residents to AGH hospital for 2 different appointments, took one resident in hospital and went back to get Resident R1 out of the van when Medical Driver noticed he didn't have the lift up and tried to pull her back but she fell to the ground striking the left side. Resident R1 was immediately surrounded by paramedics and hospital staff and she was put into ER to be evaluated and treated.</p> <p>Review of facility documentation indicated a psychiatric progress note completed on 5/12/25, with the following concerns/recommendations:</p> <p>Background information: long standing Bipolar disorder, Hx of past hallucinations</p> <p>History of present psychiatric illness: 5/12/25, psych visit: 1 week ago fell out of a van when lift not in alignment . Resident keeps asking same questions and insist she hit her head though she didn't according to staff. Obsessing about incident.</p> <p>Interview with resident: Resident R1 would like to see a counselor again, especially now that she can't stop thinking about the fall out of van. States she talks about it with everyone and has a hard time not thinking about it.</p> <p>Impressions:</p> <p>Mood ok., but displays preoccupation with thoughts of recent fall, would like to talk with therapist about this so she can stop thinking over it again and again.</p> <p>Recommendations:</p> <p>Please obtain psychology counseling for Resident R1, especially in light of recent trauma in May 2025.</p> <p>(continued on next page)</p>		

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<p>F 0745</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>During interview on 5/21/25, at 9:50 a.m. Social Service Employee E2 indicated that the facility has not had a counseling service that comes in since last year, they currently do not have a counseling appointment set up for Resident R1 and the facility failed to provided medical social services for Resident R1.</p> <p>28 Pa. Code 211.10(a) Resident care policies</p>		