

Pennsylvania Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION (POC)	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 395289	(X2) MULTIPLE CONSTRUCTION: A. BLDG: <u>00</u> B. WING: _____	(X3) DATE SURVEY COMPLETED: 04/30/2026
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NAME OF PROVIDER OR SUPPLIER: WECARE AT SOUTH HILLS REHABILITATION AND NURSING CENTER STATE LICENSE NUMBER: 193302	STREET ADDRESS, CITY, STATE, ZIP CODE: 201 VILLAGE DRIVE CANONSBURG, PA 15317
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P 5520		P 5520		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE:	(X6) DATE:

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P 5520	Continued from page 1 Nursing services. (3) Effective July 1, 2024, a minimum of 1 nurse aide per 10 residents during the day, 1 nurse aide per 11 residents during the evening, and 1 nurse aide per 15 residents overnight. This REGULATION is not met as evidenced by:	P 5520	The Facility submits this plan of correction under the procedures established by the Department of Health in order to comply with the department's directive to change conditions which the department alleges are deficient under state and/or federal long term care regulations. This plan of correction should not be construed as either a waiver or the facility right to appeal or challenge the accuracy of severity of the alleged deficiencies or an admission of past or ongoing violation of state or federal regulatory requirements. 5520CNA The Nursing schedule is created to ensure CNA staffing ratios reflects the current census per shift. Each shifts CNA staffing is adjusted based on census. When additional staff is needed to meet ratios, shifts are posted on our staffing portal, bonuses are offered, phone calls and text messages are sent to staff. The facility will utilize agency to assist with open shifts when needed. The	Completion Date: 06/15/2026 Status: APPROVED Date: 05/15/2026

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P 5520	Continued from page 2	P 5520	<p>facility attendance policy is followed for staff and disciplines occur per policy. Attendance is tracked on a calendar and reviewed weekly. The facility holds a monthly retention committee meeting and ads are posted on Indeed for open positions. Interviews are conducted immediately. We have a dedicated recruiter to assist with recruiting and hiring new nursing staff.</p> <p>The Administrator or designee will educate the Nursing Admin, HR, the scheduler and RN Supervisors on the staffing ratios and PPD and how to adjust. A staffing meeting will occur daily to review ratios with the NHA, DON, HR and scheduler. Daily recruiting calls with the NHA, HR, and recruiter occur to update the status of new applicants and interviews. The 3 week DOH Staffing Calculator Tool will be updated daily to monitor hours. The Audits will be taken to QAPI for review.</p>	

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P 5520	<p>Continued from page 3</p> <p>Based on a review of staffing documents provided by the facility and staff interview, it was determined that the facility failed to provide one nurse assistant (NA) per 10 residents on the day shift on four of nine days (4/25/26 through 4/28/26), one NA per 11 residents on the evening shift on four of nine days (4/24/26 through 4/27/26) and one NA per 15 residents on the night shift on one of nine days (4/26/26) as required.</p> <p>Findings include:</p> <p>A review of facility staffing documents provided by the facility from 4/20/26 through 4/28/26, revealed the facility failed to provide NA on the following shifts as required:</p> <table border="1"> <thead> <tr> <th>Day shift:</th> <th>Census</th> <th>Actual hours</th> <th>Hours required</th> </tr> </thead> <tbody> <tr> <td>4/25/26</td> <td>59</td> <td>29.91</td> <td>44.25</td> </tr> <tr> <td>4/26/26</td> <td>59</td> <td>31.38</td> <td>44.25</td> </tr> </tbody> </table>	Day shift:	Census	Actual hours	Hours required	4/25/26	59	29.91	44.25	4/26/26	59	31.38	44.25	P 5520		
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4/25/26	59	29.91	44.25													
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P 5520	Continued from page 4 <table border="0"> <tr> <td>4/27/26</td> <td>59</td> <td>36.59</td> <td>44.25</td> </tr> <tr> <td>4/28/26</td> <td>58</td> <td>41.25</td> <td>43.50</td> </tr> </table> <p>Evening shift: Census Actual hours Hours required</p> <table border="0"> <tr> <td>4/24/26</td> <td>58</td> <td>30.50</td> <td>39.55</td> </tr> <tr> <td>4/25/26</td> <td>59</td> <td>32.58</td> <td>40.23</td> </tr> <tr> <td>4/26/26</td> <td>59</td> <td>38.16</td> <td>40.23</td> </tr> <tr> <td>4/27/26</td> <td>59</td> <td>32.26</td> <td>40.23</td> </tr> </table> <p>Night shift: Census Actual hours Hours required</p> <table border="0"> <tr> <td>4/26/26</td> <td>59</td> <td>27.00</td> <td>29.50</td> </tr> </table> <p>During an interview on 3/9/26 at 3:00 p.m., the Director of Nursing confirmed that the facility failed to provide NA's in the facility on the above shifts as required.</p>	4/27/26	59	36.59	44.25	4/28/26	58	41.25	43.50	4/24/26	58	30.50	39.55	4/25/26	59	32.58	40.23	4/26/26	59	38.16	40.23	4/27/26	59	32.26	40.23	4/26/26	59	27.00	29.50	P 5520		
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P 5530	Continued from page 5 Nursing services. (4) Effective July 1, 2023, a minimum of 1 LPN per 25 residents during the day, 1 LPN per 30 residents during the evening, and 1 LPN per 40 residents overnight. This REGULATION is not met as evidenced by:	P 5530	The Nursing schedule is created to ensure LPN staffing ratios reflects the current census per shift. Each shifts LPN staffing is adjusted based on census. When additional staff is needed to meet ratios, shifts are posted on our staffing portal, bonuses are offered, phone calls and text messages are sent to staff. The facility will utilize agency to assist with open shifts when needed. The facility attendance policy is followed for staff and disciplines occur per policy. Attendance is tracked on a calendar and reviewed weekly. The facility holds a monthly retention committee meeting and ads are posted on Indeed for open positions. Interviews are conducted immediately. We have a dedicated recruiter to assist with recruiting and hiring new nursing staff. The Administrator or designee will educate the Nursing Admin, HR, the scheduler and RN Supervisors on the staffing ratios and PPD and how to adjust. A staffing meeting will occur daily to review ratios with the NHA, DON, HR and scheduler.	Completion Date: 06/15/2026 Status: APPROVED Date: 05/15/2026

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P 5530	Continued from page 6	P 5530	Daily recruiting calls with the NHA, HR, and recruiter occur to update the status of new applicants and interviews. The 3 week DOH Staffing Calculator Tool will be updated daily to monitor hours. The Audits will be taken to QAPI for review.	

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P 5530	Continued from page 7 Based on review of nursing time schedules and staff interview, it was determined that the facility administrative staff failed to provide a minimum of one licensed practical nurse (LPN) per 25 residents on the day shift on one of nine days (4/25/26) and one LPN per 30 residents on the evening shift on one of nine days (4/20/26). Findings include: Review of facility census data and nursing time schedules from 4/20/26 through 4/28/26, revealed the following LPN staffing shortage: Day shift: Census Actual Hours Hours Required 4/25/26 59 15.92 18.88 Evening shift: Census Actual Hours Hours Required 4/20/26 62 14.57 16.53	P 5530		

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P 5530	Continued from page 8 During an interview on 4/30/26 at 3:00 p.m. the Director of Nursing confirmed the facility failed to provide the minimum of LPN's on the above days as required.	P 5530		
P 5640		P 5640		

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P 5640	Continued from page 9 Nursing services. (2) Effective July 1, 2024, the total number of hours of general nursing care provided in each 24-hour period shall, when totaled for the entire facility, be a minimum of 3.2 hours of direct resident care for each resident. This REGULATION is not met as evidenced by:	P 5640	The Nursing schedule is created to ensure staffing PPD reflects the current census per shift. Each shifts staffing is adjusted based on census. When additional staff is needed to meet ratios, shifts are posted on our staffing portal, bonuses are offered, phone calls and text messages are sent to staff. The facility will utilize agency to assist with open shifts. The facility attendance policy is followed for staff and disciplines occur per policy. Attendance is tracked on a calendar and reviewed weekly. The facility holds a monthly retention committee meeting and ads are posted on Indeed for open positions. Interviews are conducted immediately. We have a dedicated recruiter to assisting us with recruiting and hiring new nursing staff. The Administrator or designee will educate the Nursing Admin, HR, the scheduler and RN Supervisors on the staffing ratios and PPD and how to adjust. A staffing meeting will occur daily to review ratios with the	Completion Date: 06/15/2026 Status: APPROVED Date: 05/15/2026

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P 5640	Continued from page 10	P 5640	NHA, DON, HR and scheduler. Daily recruiting calls with the NHA, HR, and recruiter occur to update the status of new applicants and interviews. The 3 week DOH Staffing Calculator Tool will be updated daily to monitor hours. The Audits will be taken to QAPI for review.	

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P 5640	Continued from page 11 Based on a review of nursing time schedules and staff interview it was determined that the facility failed to provide a minimum of 3.20 PPD (per patient daily) hours of direct care for each resident for five of nine days reviewed. Findings include: Review of staffing documents and nursing staff schedules from 4/20/26 through 4/28/26, indicated that State required PPD minimum hours of 3.20 was not met on the following days: 4/24/26= 3.14 PPD. 4/25/26= 2.94 PPD. 4/26/26= 2.88 PPD. 4/27/26= 2.97 PPD. 4/28/26= 3.19 PPD. During an interview on 4/30/26 at 3:00 p.m. the Director of Nursing confirmed that the facility failed to provide a minimum of 3.20 PPD hours of direct	P 5640		

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P 5640	Continued from page 12 care on the above dates as required.	P 5640			



Certified End Page

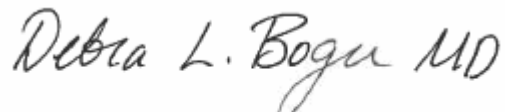
WECARE AT SOUTH HILLS REHABILITATION AND NURSING CENTER

STATE LICENSE NUMBER: 193302

SURVEY EXIT DATE: 04/30/2026

I Certify This Document to be a True and Correct Statement of Deficiencies and Approved Facility Plan of Correction for the Above-Identified Facility Survey


Jeanne Parisi
Deputy Secretary for Quality Assurance


Debra L. Bogen, MD, FAAP
Secretary of Health



**Pennsylvania
Department of Health**

THIS IS A CERTIFICATION PAGE

PLEASE DO NOT DETACH

THIS PAGE IS NOW PART OF THIS SURVEY