

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to REBECCA RESIDENCE
LEGAL ENTITY

To operate CONCORDIA AT REBECCA RESIDENCE
NAME OF FACILITY OR AGENCY

Located at 3746 CEDAR RIDGE ROAD, ALLISON PARK, PA 15101
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

To provide Personal Care Homes
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 65
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.
(MAXIMUM CAPACITY)

Restrictions: _____

This certificate is granted in accordance with the Public Welfare Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from May 13, 2010 until May 13, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 430070

Robert E. Robinson

ISSUING OFFICER

Kevin T. Casey

DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable
and should be posted in a conspicuous place in the facility.

PW 628 - 4/02



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
PO BOX 2675
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

MAY 13 2010

PHONE: (717) 783-3670
FAX: (717) 783-5662

Ms. Barbara Compson-Lloyd, RN, N.H.A.
Rebecca Residence
Concordia at Rebecca Residence
3746 Cedar Ridge Road
Allison Park, Pennsylvania 15101

Dear Ms. Compson-Lloyd:

As a result of the Department of Public Welfare's licensing inspection on March 25, 2010 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

The license indicates the home's recent change in the name of the legal entity from Concordia Lutheran Ministries, Inc. to Rebecca Residence.

A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

Sincerely,

A handwritten signature in cursive script that reads "Kevin T. Casey".

Kevin T. Casey
Deputy Secretary

Enclosures
License
Violation Report

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa. Code Chapter 2600

APR 14 2010

Page 1 of 25

NAME AND ADDRESS OF PERSONAL CARE HOME Concordia at Rebecca Residence 3746 Cedar Ridge Road, Allison Park, Pennsylvania 15101		Adult Residential License CURRENT LICENSE NUMBER 430070	
INSPECTION DATE(S) (include all dates of the inspection) March 25, 2010		REGIONAL REPRESENTATIVE Betty Bloch, Lisa Flinner-Alman and Nancy Mandock	
SIGNATURE OF LEGAL ENTITY <i>Barbara Compson-Uryd RN NHA</i>	DATE 4-14-2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Jan D. Kubert (JDK)</i>	DATE 4-20-10

1 REGULATION 55 Pa. Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
17 Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders	Confidential resident information was found unlocked and unattended in the following locations: • The Garden Level nursing station: ▪ "Assisted Living Memos and Communication Book" binder. ▪ "Assisted Living ADL Book" binder. ▪ Controlled Substance Record containing resident names, prescription medication and dosage sign sheets with staff initials of when medications are given.	04-19-2010	This violation was corrected immediately. Confidential information ie: ADL binder, communication book, controlled substance log, laboratory orders are kept locked unless staff is reviewing. The staff will be in-serviced on proper storage of confidential information by 04/19/2010.	4-20-10 <i>JL</i>

**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

Adult Residential Licensing

NAME AND ADDRESS OF PERSONAL CARE HOME Concordia at Rebecca Residence 3746 Cedar Ridge Road, Allison Park, Pennsylvania 15101		CURRENT LICENSE NUMBER 430070
INSPECTION DATE(S) (include all dates of the inspection) March 25, 2010		REGIONAL REPRESENTATIVE Betty Bloch, Lisa Flinner-Alman and Nancy Mandock
SIGNATURE OF LEGAL ENTITY <i>Barbara Lompton-Ury RN, NHA</i>	DATE 4-14-2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION DATE 4-21-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
disclosure.	<ul style="list-style-type: none"> First Floor nursing station: information on laboratory orders for resident #1, #2, and #3 were kept unlocked on the desktop at the first floor nursing station. 		The manager/designee will audit compliance monthly times 3 months and report their findings at the Quarterly Quality Assurance Committee Meeting. The Administrator oversees the Quarterly Quality Assurance Meeting.	

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME Concordia at Rebecca Residence 3746 Cedar Ridge Road, Allison Park, Pennsylvania 15101		Adult Residential Licensing CURRENT LICENSE NUMBER 430070
INSPECTION DATE(S) (Include all dates of the inspection) March 25, 2010		REGIONAL REPRESENTATIVE Betty Bloch, Lisa Finner-Alman and Nancy Mandock
SIGNATURE OF LEGAL ENTITY <i>Barbara Simpson-Uytd RN NHA</i>	DATE 4-14-2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION [Signature]
		DATE 4-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
25b The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.	Resident #4 and #5 did not sign their contracts dated 2/4/10 and 10/7/09, respectively. There was no notation of these residents' refusal or inability to sign the contracts.	03-25-2010	Resident #4 and #5 signed their contracts. The Admission Director has been in-serviced on proper protocol of resident's signing their contracts. The manager/designee will audit resident contracts monthly times 3 months and report their findings at the Quarterly Quality Assurance Committee Meeting. The Administrator oversees the Quarterly Quality Assurance Meeting.	4-20-10 [Signature]

VIOLATION REPORT
 PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME Concordia at Rebecca Residence 3746 Cedar Ridge Road, Allison Park, Pennsylvania 15101		CURRENT LICENSE NUMBER 430070	
INSPECTION DATE(S) (include all dates of the inspection) March 25, 2010		REGIONAL REPRESENTATIVE Betty Bloch, Lisa Flinner-Alman and Nancy Mandock	
SIGNATURE OF LEGAL ENTITY <i>Barbara Compson-Ulry, RN NHA</i>	DATE 4-14-2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 4-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
41e A statement signed by the resident and, if applicable, the resident's designated person acknowledging receipt of a copy of the information specified in 41d, or documentation of efforts made to obtain signature, shall be kept in the resident's record.	Resident #4 and #5 admitted 2/4/10 and 10/7/09 respectively, did not sign the resident rights signature page located in their records.	03-25-2010	Resident #4 and #5 signed their Resident Rights signature page. The admission director has been in-serviced on proper protocol of resident's signing the Resident Rights signature page. The manager/designee will audit resident rights signature page monthly times 3 months and report their findings at the Quarterly Quality Assurance Committee Meeting. The Administrator oversees the Quarterly Quality Assurance Meeting.	4-20-10 <i>[Signature]</i>

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

14 2010
Page 5 of 12

NAME AND ADDRESS OF PERSONAL CARE HOME Concordia at Rebecca Residence 3746 Cedar Ridge Road, Allison Park, Pennsylvania 15101		ADMITTED CURRENT LICENSE NUMBER 430070
INSPECTION DATE(S) (include all dates of the inspection) March 25, 2010		REGIONAL REPRESENTATIVE Betty Bloch, Lisa Finner-Arman and Nancy Mandock
SIGNATURE OF LEGAL ENTITY <i>Barbara Compson Lloyd RN NHA</i>	DATE 4-14-2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>gl</i> 4-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
65b Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following: (4) Reporting of reportable incidents and conditions.	Staff person A started work on 2/23/10 did not receive the required reportable incident training within 40 scheduled hours.	04-19-2010	Staff person A did receive the required reportable incident training within 40 scheduled hours. However, his employee record did not show written verification. Staff person A will be retrained on reportable incidents, with appropriate documentation by 04/19/2010 The manager/designee will audit new hire paperwork/training monthly times 3 months and report their findings at the Quarterly Quality Assurance Committee Meeting. The Administrator oversees the Quarterly Quality Assurance Meeting.	4-20-10 <i>gl</i>

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME Concordia at Rebecca Residence 3746 Cedar Ridge Road, Allison Park, Pennsylvania 15101		Adult Res.	CURRENT LICENSE NUMBER 430070
INSPECTION DATE(S) (Include all dates of the inspection) March 25, 2010		REGIONAL REPRESENTATIVE Betty Bloch, Lisa Flinner-Alman and Nancy Mandick	
SIGNATURE OF LEGAL ENTITY <i>Barbara Compson - Lloyd RN NHA</i>	DATE 4-14-2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE 4-20-10

1	2	3	4	5
REGULATION 55 Pa.Code § 2600.	VIOLATION	DATE BY WHICH CORRECTION WILL BE COMPLETED	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY DPW
65g Direct care staff persons, ancillary staff persons, substitute personnel and regularly-scheduled volunteers shall be trained annually in the following areas: (2) Emergency preparedness procedures and recognition and response to crises and emergency situations.	Staff persons A did not receive 2009 annual training in fall prevention. (They did receive it in accident prevention) The training year was identified as 1/1/09 – 12/31/09 by the administrator.	04-19-2010	Staff person A did receive the required reportable incident training within 40 scheduled hours. However, his employee record did not show written verification. Staff person A will be retrained on falls, with appropriate documentation by 04/19/2010 The manager/designee will audit new hire paperwork/training monthly times 3 months and report their findings at the Quarterly Quality Assurance Committee Meeting. The Administrator oversees the Quarterly Quality Assurance Meeting.	4-20-10

Western Long...

VIOLATION REPORT

PERSONAL CARE HOMES — 55 Pa. Code Chapter 2600

1.4 Page 7 of 13

NAME AND ADDRESS OF PERSONAL CARE HOME Concordia at Rebecca Residence 3746 Cedar Ridge Road, Allison Park, Pennsylvania 15101		CURRENT LICENSE NUMBER Adult Res 4300701 Licensing
INSPECTION DATE(S) (Include all dates of the inspection) March 25, 2010		REGIONAL REPRESENTATIVE Betty Bloch, Lisa Flinner-Alman and Nancy Mandock
SIGNATURE OF LEGAL ENTITY <i>Barbara Thompson-Lloyd RN NHA</i>	DATE 4-14-2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>AP</i>
		DATE 4-20-10

1 REGULATION 55 Pa. Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (Include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
81b Wheelchairs, walkers, prosthetic devices and other apparatus used by residents shall be clean, in good repair and free of hazards.	The L-shaped grab/assist bar was not securely attached to the upper portion of resident # 3's bed. It was loose which could pose a possible limb entrapment hazard. Repeated Violation – 1/16/09	4-20-10	This is not a violation. Resident #3 grab/assist bar was secured per manufacture guidelines. The surveyor used extreme force times 2 then broke the clip and dislodged the grab/assist bar. The Administrator or designated STAFF person will check all grab/assist bars weekly to ensure all grab/assist bars are securely attached to the resident beds. 4-20-10.	Steps have been taken to correct violation; full compliance is not verifiable 4-20-10 Date Initials (DPW) <i>SL</i>

Wednesday

**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

NAME AND ADDRESS OF PERSONAL CARE HOME Concordia at Rebecca Residence 3746 Cedar Ridge Road, Allison Park, Pennsylvania 15101		CURRENT LICENSE NUMBER 430070
INSPECTION DATE(S) (Include all dates of the inspection) March 25, 2010		REGIONAL REPRESENTATIVE Betty Bloch, Lisa Flinner-Alman and Nancy Mandock
SIGNATURE OF LEGAL ENTITY <i>Barbara Compson-Lloyd RN NHA</i>	DATE 4-14-2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>JL</i>
		DATE 4-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
85a Sanitary conditions shall be maintained.	The microwave which is located in the North Court Country Kitchen had excessive food spillage in it. The freezer compartment of the refrigerator which is located in the same area of the home had excessive food spillage in it and was sticky.	04-19-2010	The microwave and freezer were immediately cleaned while the surveyor was still on the unit. The residents use the microwave and refrigerator/freezer. The equipment is cleaned several times a day along with a weekly deep cleaning schedule. The staff will be in-serviced on cleaning the microwave, refrigerator/freezer by 4/19/2010 The manager/designee will audit cleanliness of microwave, refrigerator/freezer weekly times 4 weeks, monthly times 2 months, and report their findings at the Quarterly Quality Assurance Committee Meeting. The Administrator oversees the Quarterly Quality Assurance Meeting.	4-20-10 <i>JL</i>

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME Concordia at Rebecca Residence 3746 Cedar Ridge Road, Allison Park, Pennsylvania 15101		CURRENT LICENSE NUMBER 430670 Adult Residential Care Licensing
INSPECTION DATE(S) (Include all dates of the inspection) March 25, 2010		REGIONAL REPRESENTATIVE Betty Bloch, Lisa Flinner-Alman and Nancy Mandock
SIGNATURE OF LEGAL ENTITY <i>Barbara Compson, Urd RN NHA</i>	DATE 4-19-2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION DATE 4-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (Include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
105g-1 To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.	The lint trap of the dryer located in the North Court staff laundry area had approximately a 1/2" build-up of lint in it which could pose a possible fire safety hazard.	04-19-2010	The lint was removed immediately. This dryer was used by a resident prior to inspection. All other facility dryers were free of lint. The staff will be in-serviced on checking dryers for lint by 4/19/2010. The manager/designee will audit the dryers for signs of lint weekly times 4 weeks, monthly times 2 months and report their findings at the Quarterly Quality Assurance Committee Meeting. The Administrator oversees the Quarterly Quality Assurance Meeting.	4-20-10 4

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

15
 Page 11 of 15

NAME AND ADDRESS OF PERSONAL CARE HOME Concordia at Rebecca Residence 3746 Cedar Ridge Road, Allison Park, Pennsylvania 15101		CURRENT LICENSE NUMBER 430070 <i>Adult Residential Licensing</i>
INSPECTION DATE(S) (Include all dates of the inspection) March 25, 2010		REGIONAL REPRESENTATIVE Betty Bloch, Lisa Flinner-Alman and Nancy Mandock
SIGNATURE OF LEGAL ENTITY <i>Barbara Compson Lloyd RN NHA</i>	DATE <i>4-14-2010</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION DATE <i>4-20-10</i>

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
187a A medication record shall be kept to include the following for each resident for whom medications are administered: (13) Date and time of medication administration. (14) Name and initials of the staff person administering the medication.	The medication administration record binders on the First floor and North area did not contain a "master key" in them with the initials, printed name and signature of staff persons who administered medications to residents.	04-19-2010	The master key was kept on the nursing units. The master key is now kept in the medication administration record binders. The nursing staff will be in-serviced by 04/19/2010 on the location of the master key. The manager/designee will audit the medication administration record binder to assure the master key is present, monthly times 3 months and report their findings at the Quarterly Quality Assurance Committee Meeting. The Administrator oversees the Quarterly Quality Assurance Meeting.	4-20-10

**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

NAME AND ADDRESS OF PERSONAL CARE HOME Concordia at Rebecca Residence 3746 Cedar Ridge Road, Allison Park, Pennsylvania 15101		CURRENT LICENSE NUMBER Adult Residential Licensing 430070
INSPECTION DATE(S) (Include all dates of the inspection) March 25, 2010		REGIONAL REPRESENTATIVE Betty Bloch, Lisa Finner-Alman and Nancy Mandock
SIGNATURE OF LEGAL ENTITY <i>Barbara Compston, Uryd RN NHA</i>	DATE 4-14-2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION DATE 4-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
182c Medication administration includes the following activities, based on the needs of the resident: (1) Identify the correct resident. (2) If indicated by the prescriber's orders, measure vital signs and administer medications accordingly. (3) Remove the medication from the original container. (4) Crush or split the medication as ordered by the prescriber. (5) Place the medication in a medication cup or other appropriate container, or in	On 03/25/10 staff person B was observed administering medication to resident #8. Staff person B removed resident #8's medication for the container and initialing the medication as being administered, prior to administering the medication to the resident.	04-19-2010	Staff person B was rein-serviced on the proper method of documentation/medication administration. The staff will be in-serviced by 04/19/2010 on the proper method of documentation/medication administration. The manager/designee will audit the medication administration/documentation weekly times 4 weeks and monthly times 2 months, and report their findings at the Quarterly Quality Assurance Committee Meeting. The Administrator oversees the Quarterly Quality Assurance Meeting.	Steps have been taken to correct violation; full compliance is not verifiable 4-20-10 Date Initials (DPW)

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

13 & 17
 Page 1 of 18

NAME AND ADDRESS OF PERSONAL CARE HOME Concordia at Rebecca Residence 3746 Cedar Ridge Road, Allison Park, Pennsylvania 15101		Adult Residential 430070 Licensing	CURRENT LICENSE NUMBER
INSPECTION DATE(S) (Include all dates of the inspection) March 25, 2010		REGIONAL REPRESENTATIVE Betty Bloch, Lisa Flinner-Alman and Nancy Mandock	
SIGNATURE OF LEGAL ENTITY <i>Barbara Compson Lloyd RAI NHA</i>	DATE 4-14-2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE 4-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (Include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
191 The home shall educate the resident of his/her right to question or refuse a medication if he/she believes there may be a medication error. Documentation of this resident education shall be kept.	Residents #5 and #6, admitted 2/4/10 and 8/19/09 respectively, did not sign the statement in their records indicating that they were educated in their right to refuse medication.	03-25-2010	Resident #5 and #6 were given an admission packet and were aware of their rights. The family/POA signed the resident education form related to resident right to refuse medications. The residents signed this form on 03/25/2010. The admission director has been inserviced on the regulation/need for the resident to sign this form. The manager/designee will audit the resident education sheet alerting the resident their right to refuse medications, monthly times 3 months and report their findings at the Quarterly Quality Assurance Committee Meeting. The Administrator oversees the Quarterly Quality Assurance Meeting.	4-20-10 <i>SJ</i>

