

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to VINCENTIAN HOME, INC.

LEGAL ENTITY

To operate VINCENTIAN HOME

NAME OF FACILITY OR AGENCY

Located at 111 PERRYMONT ROAD, PITTSBURGH, PA 15237

(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 60
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 October 26, 2010 until October 26, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 431530

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

NOV 04 2010

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

Sister Charlene ReebeL,SCN, Administrator
Vincetian Home, Inc.
Vincetian Home
111 Perrymont Road
Pittsburgh, Pennsylvania 15237

Dear Sister ReebeL:

As a result of the Department of Public Welfare's licensing inspection on September 2, 2010, September 3, 2010 and October 14, 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.

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 **Western Region**
 PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

SEP 24 2010

NAME AND ADDRESS OF PERSONAL CARE HOME Vincentian Home 111 Perrymont Road, Pittsburgh, PA 15237		CURRENT LICENSE NUMBER Adult Residential Licensing 431530
INSPECTION DATE(S) (Include all dates of the inspection) September 2 and 3, 2010		REGIONAL REPRESENTATIVE M. Stepanovich, L. Mazza
SIGNATURE OF LEGAL ENTITY <i>Sister Charlene Reebel, PGHA</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Shane R. Pyle</i>
		DATE 10-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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
26b The quality management plan shall address the periodic review and evaluation of the following: (1) Reportable incident and condition reporting procedures. (2) Complaint procedures. (3) Staff person training. (4) Licensing violations and plans of correction, if applicable. (5) Resident or family councils, or both, if applicable.	The quality management plan dated 6/14/10 does not address incidents, complaint procedures, staff training or licensing violations. The home did not have a quality management review in 2009.	9-9-2010	Quality Management Plan for all reportable incidents, complaint procedure, staff person training, licensing violation, plan of corrections and resident/family counsel meeting will be discussed at every staff meeting. (Please see attached minutes) Administrator/designee will make sure that Quality Management is on the Agenda and notable issues are discussed at every staff meeting. <i>Quality mgmt. Plan has been updated to include required components.</i>	<i>SEP 10-20-10</i>

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

SEP 24 2010

NAME AND ADDRESS OF PERSONAL CARE HOME Vincentian Home 111 Perrymont Road, Pittsburgh, PA 15237		CURRENT LICENSE NUMBER Adult Residential Licensing 431530
INSPECTION DATE(S) (Include all dates of the inspection) September 2 and 3, 2010		REGIONAL REPRESENTATIVE M. Stepanovich, L. Mazza
SIGNATURE OF LEGAL ENTITY <i>Sister Charlene Reebel</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>SJKP</i>
		DATE 10-20-20

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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.	There was an enabler on resident #1's bed. The bottom portion had an opening which was large enough to pose an entrapment risk for the resident's limb. In addition, the resident's support plan dated 6/15/10 did not address the use of an enabler. (Observed 9/2/10)	9-16-2010	Resident #1's – a quilted cover was made by Vincentian Personal Care Home (VPCH) staff member for the enabler on the resident's bed. The use of the bed enabler was also addressed on the resident's #1 support plan. All durable Medical Equipment will be evaluated monthly by the Resident Service Coordinator (RSC) and the Charge Nurse to ensure safety. Bi-annually a safety check will be conducted by the administrator.	<i>SJKP 10-20-10</i>

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

SEP 24 2010

NAME AND ADDRESS OF PERSONAL CARE HOME Vincentian Home 111 Perrymont Road, Pittsburgh, PA 15237		CURRENT LICENSE NUMBER 431530
INSPECTION DATE(S) (Include all dates of the inspection) September 2 and 3, 2010		REGIONAL REPRESENTATIVE M. Stepanovich, L. Mazza
SIGNATURE OF LEGAL ENTITY <i>Sister Charlene Reebel</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>
		DATE 10-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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
91 Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control center, municipal emergency management agency and personal care home complaint hotline shall be posted on or by each telephone with an outside line.	There were no emergency phone numbers for the telephone in private bedroom #012. (Observed 9/2/10)	9-2-2010	In private bedroom #012, the emergency numbers were placed on the phone on 9-2-2010. All other pertinent telephones were checked immediately for emergency numbers. The Administrator/Designee will monitor telephones with an outside line for the posting of emergency numbers quarterly.	<i>[Signature]</i> 10-20-10

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

SEP 24 2010

NAME AND ADDRESS OF PERSONAL CARE HOME Vincentian Home 111 Perrymont Road, Pittsburgh, PA 15237		CURRENT LICENSE NUMBER 431530
INSPECTION DATE(S) (include all dates of the inspection) September 2 and 3, 2010		REGIONAL REPRESENTATIVE M. Stepanovich, L. Mazza
SIGNATURE OF LEGAL ENTITY <i>Sister Charene Reebel</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION [Signature]
		DATE 6-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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
121b Doors used for egress routes from rooms and from the building may not be equipped with key-locking devices, electronic card operated systems or other devices which prevent immediate egress of residents from the building, unless the home has written approval or a variance from the Department of Labor and Industry, the Department of Health or the appropriate local building authority.	Residents #2, #3 and #4 are not able to open the emergency exit doors at the end of the east and west wings or the exit door across from the nurse's station. Each of these doors is equipped with a keypad.	9-20-2010	Maintenance removed all 5 key pads from designated areas on 9-20-2010. The facility's concern regarding these changes are safety issues for the residents as four of the egress's have a flight of stairs. Administrator/ Designee will instruct staff about diligence in watching residents around these designated areas. <i>New keypads installed in which all residents can open and exit freely without delay.</i>	Steps have been taken to correct violation; full compliance is not verifiable 10/10/10 [Signature] Date Initials (DPW)

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

SEP 24 2010

NAME AND ADDRESS OF PERSONAL CARE HOME Vincentian Home 111 Perrymont Road, Pittsburgh, PA 15237		CURRENT LICENSE NUMBER 431530
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SIGNATURE OF LEGAL ENTITY <i>Sister Charlene Reebel</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION [Signature]
		DATE 10-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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
132h Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.	Staff does not have a means of communicating between the fire safe areas. The home's fire watch policy indicates a 2 way radio /cell phone is used. According to staff person A, neither of these devices is currently available.	9-24-2010	In compliance with our fire watch policy and to facilitate communication between the fire safe areas, the facility will purchase two-way radios by 9-24-2010. Administrator/Designee will inservice the staff that two-way radios will be used for communication between the fire safe areas.	Steps have been taken to correct violation; full compliance is not verifiable <u>10-20-10</u> [Signature] Date Initials (DPW)

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

SEP 24 2010

NAME AND ADDRESS OF PERSONAL CARE HOME Vincentian Home 111 Perrymont Road, Pittsburgh, PA 15237		CURRENT LICENSE NUMBER 431530
INSPECTION DATE(S) (Include all dates of the inspection) September 2 and 3, 2010		REGIONAL REPRESENTATIVE M. Stepanovich, L. Mazza
SIGNATURE OF LEGAL ENTITY <i>Sister Charlene Reibel</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>SLP</i>
		DATE 10-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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
141a-1 A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission.	Resident #5, admitted 6/9/10, does not have a medical evaluation.	9-23-2010	Resident #5 had a medical evaluation completed on admission but it was documented on an incorrect form. This was corrected by having the physician complete a Medical Evaluation form for Resident 5. The Charge Nurse will notify the physician to complete the Medical Evaluation form timely. RSC/Nursing Staff will monitor new admissions for the completion of the Medical Evaluation form quarterly.	<i>SLP 10-20-10</i>

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

NAME AND ADDRESS OF PERSONAL CARE HOME Vincetian Home 111 Perrymont Road, Pittsburgh, PA 15237		SEP 24 2010	CURRENT LICENSE NUMBER 431530	
INSPECTION DATE(S) (Include all dates of the inspection) September 2 and 3, 2010		REGIONAL REPRESENTATIVE M. Stepanovich, L. Mazza		
SIGNATURE OF LEGAL ENTITY <i>Sister Charlene Reebel</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>SKP</i>		DATE 10-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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
141a-2 The medical evaluation shall include the following: (1) A general physical examination by a physician, physician's assistant or nurse practitioner. (2) Medical diagnosis including physical or mental disabilities of the resident, if any. (3) Medical information pertinent to diagnosis and treatment in case of an emergency. (4) Special health or dietary needs of the resident. (5) Allergies. (6) Immunization history.	Resident #6's medical evaluation dated 12/7/09 does not include dietary needs. Resident #7's medical evaluation dated 6/14/10 does not indicate ability to administer medications. Repeat Violation 5/20/09 et. al.	9-7-2010	Resident #6 - medical evaluation was updated to address dietary needs. Resident #7 - medical evaluation was updated to address ability to administer medications. RSC/Nursing Staff will review the Medical Evaluation to make sure forms are completed. In addition, the timeliness of the completion of the forms will be addressed with the physicians.	Steps have been taken to correct violation; full compliance is not verifiable <u>10-20-10</u> <i>SKP</i> Date Initials (DPW)

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

SEP 24 2010

NAME AND ADDRESS OF PERSONAL CARE HOME Vincentian Home 111 Perrymont Road, Pittsburgh, PA 15237		CURRENT LICENSE NUMBER Adult Residential Licensing 431530
INSPECTION DATE(S) (Include all dates of the inspection) September 2 and 3, 2010		REGIONAL REPRESENTATIVE M. Stepanovich, L. Mazza
SIGNATURE OF LEGAL ENTITY <i>Sister Charlene Reibel</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>gnc</i>
		DATE 10-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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
(7) Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications. (8) Body positioning and movement stimulation for residents, if appropriate. (9) Health status. (10) Mobility assessment, updated annually or at the Department's request.				

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

SEP 24 2010

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SIGNATURE OF LEGAL ENTITY <i>Sister Charlene Reebel</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION SLP	DATE 10-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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
143b The following current emergency medical and health information shall be available at all times for each resident and shall accompany the resident when the resident needs emergency medical attention: (6). A list of allergies.	Resident #9's medical evaluation dated 11/24/09 indicates an allergy to aspirin; however, the resident's emergency medical transfer sheet is blank in the allergy section. Resident #10's medical evaluation dated 3/19/10 indicates allergies to morphine and sulfa; however, the resident's emergency medical transfer sheet indicates allergies are not known. Resident #11's medical evaluation dated 7/22/10 indicates an allergy to morphine; however, the	9-8-2010	Resident #9 – emergency medical transfer sheet was updated to address allergy to aspirin. Resident #10 – emergency medical transfer sheet was updated to address allergy to morphine and sulfa. Resident #11 – emergency medical transfer sheet was updated to address allergy to morphine. All residents emergency medical transfer sheets have been reviewed by RSC/Charge Nurse and allergies have been noted and updated. RSC/Charge Nurse will review emergency transfer sheets monthly.	Steps have been taken to correct violation; full compliance is not verifiable <u>10-20-10</u> SLP Date Initials (DPW)

VIOLATION REPORT Western Region
 PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600
 SEP 24 2010

NAME AND ADDRESS OF PERSONAL CARE HOME Vincentian Home 111 Perrymont Road, Pittsburgh, PA 15237		CURRENT LICENSE NUMBER Adult Residential Licensing #31530
INSPECTION DATE(S) (Include all dates of the inspection) September 2 and 3, 2010	REGIONAL REPRESENTATIVE M. Stepanovich, L. Mazza	
SIGNATURE OF LEGAL ENTITY <i>Sister Charlene Reebel</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>SEP</i>
		DATE 10-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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
	resident's emergency medical transfer sheet is blank in the allergy section.			

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

SEP 24 2010

NAME AND ADDRESS OF PERSONAL CARE HOME Vincentian Home 111 Perrymont Road, Pittsburgh, PA 15237		CURRENT LICENSE NUMBER Adult Residential Licensing 431530	
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SIGNATURE OF LEGAL ENTITY <i>Sister Chastene Reebel</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>SLP</i>	DATE 10-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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
181c, 227e 181c A resident who desires to self-administer his medications shall be assessed by a physician, physician's assistant or certified registered nurse practitioner regarding the ability to self-administer and the need for medication reminders. 227e The resident's assessment shall document the ability of the resident to self-administer his/her medications or the need for medication reminders or	Resident #12's assessment dated 5/20/10 does not indicate the resident's ability to administer medications.	9-20-2010	Resident #12 – Charge Nurse completed a second assessment and indicated the resident's ability to self administer medications. Charge Nurse will monitor assessments to evaluate residents ability to self administer medications. RSC/Charge Nurse will review the residents charts monthly.	<i>SLP 10-20-10</i>

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

SEP 24 2010

NAME AND ADDRESS OF PERSONAL CARE HOME Vincentian Home 111 Perrymont Road, Pittsburgh, PA 15237		Adult Residential Licensing	CURRENT LICENSE NUMBER 431530
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SIGNATURE OF LEGAL ENTITY <i>Sister Charlene Reebel</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION SMP	DATE 10-20-10

1	2	3	4	5
REGULATION 55 Pa.Code § 2600.	VIOLATION/CLASS	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
medication administration.				

VIOLATION REPORT
 PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600
 SEP 24 2010

NAME AND ADDRESS OF PERSONAL CARE HOME Vincentian Home 111 Perrymont Road, Pittsburgh, PA 15237		Adult Residential Licensing	CURRENT LICENSE NUMBER 431530
INSPECTION DATE(S) (Include all dates of the inspection) September 2 and 3, 2010		REGIONAL REPRESENTATIVE M. Stepanovich, L. Mazza	
SIGNATURE OF LEGAL ENTITY <i>Sister Charelene Reebel</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>CPA</i>	DATE 10-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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
185a The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.	Resident #13's MAR (medication administration record) indicates an order for Docusate Sodium 100 mg – 1 capsule daily as needed. However, there was none available in the home. (Observed 9/3/10)	9-23-2010	Resident #13 - reviewing the resident's usage of PRN medication, it was determined the resident did not use the Docusate Sodium past 30 days. The medication was returned to pharmacy prior to receiving the physician's order to discontinue the medication. To correct this violation, an order has been received by the physician to discontinue this medication on 9-9-2010. Nursing Staff will be inserviced on having all medications available that reflect a physician's order. RSC/Charge Nurse will monitor MAR's with medications monthly.	<i>SCP 10-20-10</i>

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

SEP 24 2010

NAME AND ADDRESS OF PERSONAL CARE HOME Vincentian Home 111 Perrymont Road, Pittsburgh, PA 15237		CURRENT LICENSE NUMBER Adult Residential Licensing 431530	
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SIGNATURE OF LEGAL ENTITY <i>Sister Charlene Reebel</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>SLP</i>	DATE 10-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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
187b The information in subsections 187a13 and 187a14 shall be recorded at the time the medication is administered.	Resident #1's MAR (medication administration record) indicates an order for Polyeth Glyc Pow-Miralax – mix 1 cap with 8 oz. water. However, the 8 AM dose was not initialed as given on 9/1/10 and 9/3/10.	9-22-2010	Resident #1 – interview with nurse discovered the resident did receive the medication but did not document on the MAR timely. A late entry was made in the MAR to reflect the medication was given. Nursing Staff will be inserviced in completing proper MAR documentation at the time of medication administration. RSC/Charge Nurse will monitor MAR's monthly for completion.	<i>SLP 10-20-10</i>

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

SEP 24 2010

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SIGNATURE OF LEGAL ENTITY <i>Sister Charlene Reebel</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION SRP
		DATE 10-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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
226a The resident shall be assessed for mobility needs as part of the resident's assessment.	Resident #5's MA-51 dated 6/8/10 indicates the resident can evacuate with minimal assistance in an emergency. (This resident does not have a medical evaluation). The support plan dated 6/9/10 indicates the resident needs verbal assistance to evacuate in an emergency; however, the assessment dated 6/9/10 indicates the resident is independently mobile with a walker.	9-8-2010	Resident #5 – changes were made to the support plan to reflect the assessment as far as mobility needs. In an emergency, verbal direction is given to the residents to the correct egress route. For this reason, the support plan was marked with verbal assistance. Upon inspection from DPW on 9-2-2010, facility was informed that verbal assistance in an emergency implies the resident is immobile. All current residents support plans were reviewed and updated to reflect this change. RSC/Charge Nurse will monitor support plans to reflect resident's assessment monthly.	Steps have been taken to correct violation; full compliance is not verifiable 10-20-10 SRP Date Initials (DPW)

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600
 SEP 24 2010

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SIGNATURE OF LEGAL ENTITY <i>Sister Charlene Reebel</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION SRP	DATE 10-20-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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
227a A resident requiring personal care services shall have a written support plan developed and implemented within 30 days of admission to the home. The support plan shall be documented on the Department's support plan form.	Resident #5's support plan dated 6/9/10 does not include all of the following diagnoses as indicated on the assessment dated 6/9/10: <ul style="list-style-type: none"> • Renal insufficiency • Ischemic colitis • DJD • Osteoarthritis • Lumbar stenosis • CAD • H/O recurrent UTI • Diverticulosis Resident #7's support plan dated 6/11/10 does not include all of the following diagnoses as indicated on the assessment dated 6/11/10:	9-15-2010	Resident #5 – support plan was updated to include all the diagnoses that have been identified on the assessment. Resident #7 – support plan was updated to include all the diagnoses that have been identified on the assessment. Resident #11 – support plan was updated to include resident needs assistance with footwear for dressing. RSC/Charge Nurse will coordinate diagnosis with assessments and support plan upon admission and update as needed. RSC/Charge Nurse will review the residents charts monthly.	Steps have been taken to correct violation; full compliance is not verifiable 10-20-10 SRP Date Initials (DPW)

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

SEP 24 2010

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INSPECTION DATE(S) (Include all dates of the inspection) September 2 and 3, 2010		REGIONAL REPRESENTATIVE M. Stepanovich, L. Mazza	
SIGNATURE OF LEGAL ENTITY <i>Sister Charlene Reebel</i>	DATE 9-22-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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
	<ul style="list-style-type: none"> • Anemia • Osteoarthritis • Syncope and dizziness • HTN • Hypothyroidism • Hypercholesterolemia <p>Resident #11's support plan dated 7/13/10 indicates resident needs assist with footwear for dressing. However, the assessment dated 7/12/10 indicates the resident is independent for dressing and undressing.</p>			