

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to CONCORDIA LUTHERAN MINISTRIES, INC.

LEGAL ENTITY

To operate CONCORDIA AT RIDGEWOOD PLACE

NAME OF FACILITY OR AGENCY

Located at 1460 RENTON ROAD, PITTSBURGH, PA 15239

(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 75
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 April 16, 2012 until April 16, 2013,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 430040

Robert E. Robinson

ISSUING OFFICER

[Signature]

DIRECTOR

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 - 01/11



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

ADULT RESIDENTIAL LICENSING

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

MAY 24 2012

Ms. Carol A. Strejcek, Facility Director
Concordia Lutheran Ministries, Inc.
Concordia at Ridgewood Place
1460 Renton Road
Pittsburgh, Pennsylvania 15239

Dear Ms. Strejcek:

As a result of the Department of Public Welfare's licensing inspection on April 2, 2012 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 black ink, appearing to read "Ronald Melusky".

Ronald Melusky
Director

Enclosures
License
Violation Report

Violation Report: 43004 - 04/02/2012 - Miller-Linhart, Alden

1. REGULATION 55 Pa.Code §2600

2600.51 - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (OAPSA) (35 P.S. §§ 10225.101-10225.5102); and 6 Pa.Code Chapter 15 (relating to protective services for older adults).

2. DESCRIPTION OF VIOLATION

Staff person A DOH 10/26/2011 was living in the state of Maryland within the last two calendar years prior to employment. An FBI check was requested on 11/01/2011. A letter dated 12/08/2011 verifying that the FBI is unable to process the application due to an open disposition for one of the prohibited offenses as defined in the Older Adults Protective Services Act was sent to the staff person and to the "Human Resource Department" at Concordia Ridgewood Place. The staff person continued to work unsupervised as a direct care aide in the personal care home until 3/28/2012, the date of a written suspension of employment notice issued by the home's administrator.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. 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.

BUSINESS OFFICE MANAGER WILL FOLLOW CONCORDIA'S NEW HIRE CHECKLIST, CHECKING TO MAKE SURE ALL CLEARANCES ARE RECEIVED.

BUSINESS OFFICE MANAGER WILL REPORT RESULTS OF CHECKLIST MONITORS TO THE QUALITY ASSURANCE COMMITTEE

ENCLOSED IS A COPY OF THE FBI CLEARANCE PAPERWORK FOR THE EMPLOYEE IN QUESTION. (ex. A)

6-15-12 the administrator and any staff person involved in the hiring and retention of staff will complete the on-line Older Adult Protective Services Act training. Documentation will be kept.

6-15-12 the administrator will review the records of all current staff members to ensure that a PA State Police criminal background check has been completed, that each record does not contain any prohibited offenses and that an FBI background check has been completed for employees who were not residents of Pennsylvania for the two years prior to date of hire. 5-8-12 JJP

RECEIVED
MAY 7 2012
Western Field Office
Adult Residential Licensing

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Carol Strejcek

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page)

CAROL STREJCEK - ADMINISTRATOR

Date 5/3/12

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of

5-8-12
(Date)

Signature of Legal Entity Representative

5-8-12
(Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

The above plan of correction was approved by

JJP
(Initials)

Violation Report: 43004 - 04/02/2012 - Miller-Linhart, Alden

1. REGULATION 55 Pa.Code §2600

2600.52 - Hiring, retention and utilization of staff persons shall be in accordance with the Older Adult Protective Services Act (35 P.S. §§ 10225.101-10225.5102) and 6 Pa.Code Chapter 15 (relating to protective services for older adults) and other applicable regulations.

2. DESCRIPTION OF VIOLATION

Staff person A DOH 10/26/2011 was living in the state of Maryland within the last two calendar years prior to employment. An FBI check was requested on 11/01/2011. A letter dated 12/08/2011 verifying that the FBI is unable to process the application due to an open disposition for one of the prohibited offenses as defined in the Older Adults Protective Services Act was sent to the staff person and to the "Human Resource Department" at Concordia Ridgewood Place. The staff person continued to work unsupervised as a direct care aide in the personal care home until 3/28/2012, the date of a written suspension of employment notice issued by the home's administrator.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. 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.

BUSINESS OFFICE MANAGER WILL FOLLOW PA GUIDELINES ACCORDING TO CRIMINAL HISTORY CHECKS.

BUSINESS OFFICE MANAGER WILL FOLLOW NEW HIRE CHECKLIST TO ENSURE ALL DOCUMENTS HAVE BEEN RECEIVED, REVIEWED AND THE NEW EMPLOYEE IS CLEARED TO WORK UNSUPERVISED. RESULTS OF THESE CHECKLISTS WILL BE RECORDED BY BUSINESS OFFICE MANAGER AND REPORTED TO Q.A. COMMITTEE

ENCLOSED IS A COPY OF FBI CLEARANCE PAPERS FOR THE EMPLOYEE IN QUESTION (M.A)

6-15-12 the administrator and any staff person involved in the hiring and retention of staff will complete the on-line Older Adult Protective Services Act training. Documentation will be kept. **RECEIVED**

6-15-12 the administrator will review the records of all current staff members to ensure that a PA State Police criminal background check has been completed, that each record does not contain any prohibited offenses, and that an FBI background check has been completed for employees who were not residents of Pennsylvania for the two years prior to date of hire. 3-8-12 Julie J. Rezzini

Repeat Violation: No	Date(s) of Previous Violation(s):	
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Signature of Legal Entity Representative (Required on EVERY Page) *Carol Strickel*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *CAROL STRICKEL - ADMINISTRATOR* Date *5/3/12*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 5-8-12 (Date)

Signature of Legal Entity Representative 5-8-12 (Date)

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

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 43004 - 04/02/2012 - Miller-Linhart, Alden

1. REGULATION 55 Pa.Code §2600

2600.91 - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

2. DESCRIPTION OF VIOLATION

The Personal Care Hotline number that is posted with the emergency phone numbers in the personal care home is incorrect and needs to be updated. Incorrect PCH hotline number listings were observed in resident rooms: 214, 217, 230, and 231.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. 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.

ADMINISTRATIVE ASSISTANT CORRECTED THE PERSONAL CARE HOTLINE NUMBER ON APRIL 2, 2012 (DAY OF INSPECTION). ALL AFFECTED ROOMS HAVE CORRECT PHONE NUMBER LISTINGS. UPDATED PHONE NUMBERS WILL BE ADDED TO OUR ROOM CHECK MONITORS TO ENSURE COMPLIANCE. RESULTS OF THESE MONITORS WILL BE REPORTED TO G.A. COMMITTEE ENCLOSED IS A COPY OF UPDATED PHONE LIST THAT IS POSTED BY EACH PHONE (EX. B)

RECEIVED

MAY 7 2012

Western Field Office
Adult Residential Licensing

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) Carol Strojcek

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) CAROL STROJCEK - ADMINISTRATOR Date 5/3/12

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 5-8-12 (Date)

Signature of Legal Entity Representative 5-8-12 (Date)

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

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 43004 - 04/02/2012 - Miller-Linhart, Alden

1. REGULATION 55 Pa.Code §2600

2600.95 - Furniture and equipment must be in good repair, clean and free of hazards.

2. DESCRIPTION OF VIOLATION

The attached grab bars on the toilet in the bathroom for bedroom #214 are loose and wobbly- there is movement of several inches in the grab bars when used.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. 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 GRAB BARS IN ROOM # 214 WERE REPLACED WITH NEW GRAB BARS BY THE MAINTENANCE DEPARTMENT ON APRIL 3, 2012. MONITORS ARE IN PLACE TO ENSURE ALL GRAB BARS ARE SECURE AND WILL BE REPORTED TO Q.A. COMMITTEE. ENCLOSED IS A PICTURE OF GRAB BARS THAT WERE INSTALLED THAT DAY. (EX.C)

RECEIVED

Western Field Office
Adult Residential Licensing

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Carol Stupick

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page)

CAROL STREJER - ADMINISTRATOR

Date 5/3/12

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of

5-8-12
(Date)

Signature of Legal Entity Representative

5-8-12
(Date)

The above plan of correction was approved by

AS
(Initials)

Fully Implemented

Partially Implemented - Adequate Progress

Partially Implemented - Inadequate Progress

Not Implemented

Violation Report: 43004 - 04/02/2012 - Miller-Linhart, Alden

1. REGULATION 55 Pa.Code §2600

2600.102(d)(1) - Toilet and bath areas must have grab bars, hand rails or assist bars.

2. DESCRIPTION OF VIOLATION

There is no grab bar, hand rail or assist bar located on or near the toilet in the bathroom for room #114.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. 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.

GRAB BARS WERE INSTALLED ON THE TOILET IN ROOM # 114.
 BY THE MAINTENANCE DEPARTMENT ON 4/3/12.
 MONITORS ARE IN PLACE TO ENSURE THAT EACH RESIDENT'S
 BATHROOM HAS GRAB BARS AND RESULTS ARE RECORDED
 AND REPORTED TO Q.A. COMMITTEE.
 ENCLOSED IS A PICTURE OF INSTALLED GRAB BARS IN
 ROOM #114 (encl.)

RECEIVED

MAY 7 2012

Western Field Office
 Adult Residential Licensing

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Carol Streck*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *CAROL STRECK - ADMINISTRATOR* Date *5/3/12*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>5-8-12</u> (Date)	Signature of Legal Entity Representative <u>5-8-12</u> (Date)
The above plan of correction was approved by <u><i>AS</i></u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 43004 - 04/02/2012 - Miller-Linhart, Alden

1. REGULATION 55 Pa.Code §2600

2600.123(b) - Copies of the emergency procedures as specified in § 2600.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.

2. DESCRIPTION OF VIOLATION

The home's emergency procedures are not posted in a conspicuous and public place in the home.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. 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.

EMERGENCY PREPAREDNESS BINDER WAS PLACED IN WALL HANGER AT RECEPTIONIST AREA BY THE ADMISSION COORDINATOR ON APRIL 2, 2012. THE RECEPTIONIST WILL INCLUDE IN HER MONITORS, CHECKING FOR EMERGENCY PREPAREDNESS BINDER AND RESULTS WILL BE REPORTED TO Q.A. COMMITTEE DURING MEETINGS.

ENCLOSED IS A PICTURE SHOWING WHERE THE BINDER IS LOCATED. (EX.C)

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Western Field Office
Adult Residential Licensing

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Carol Stretok*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *CAROL STRE TOK - ADMINISTRATOR* Date *5/3/12*

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The above plan of correction is approved as of <u>5-8-12</u> (Date)	Signature of Legal Entity Representative <u>5-8-12</u> (Date)
The above plan of correction was approved by <i>[Signature]</i> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 43004 - 04/02/2012 - Miller-Linhart, Alden

1. REGULATION 55 Pa.Code §2600

2600.132(b) - A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.

2. DESCRIPTION OF VIOLATION

There is no documentation of a fire safety inspection conducted by a fire safety expert in 2011.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. 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.

ON MAY 12, 2012, THE RENTON FIRE DEPARTMENT CHIEF WILL BE CONDUCTING AN ANNUAL FIRE DRILL EVACUATION AND FIRE SAFETY INSPECTION OF THE BUILDING.

ENCLOSED IS A LETTER STATING WHEN THIS WILL BE DONE AND BY WHOM (RX. D)

ONCE THE INSPECTION IS COMPLETED, THE ADMINISTRATOR WILL FAX A COPY OF OUR SUPERVISED FIRE DRILL AND FIRE SAFETY INSPECTION LETTER, NO LATER THAN MAY 21, 2012.

YEARLY SUPERVISED DRILLS AND FIRE SAFETY INSPECTIONS WILL BE CONDUCTED BY A FIRE EXPERT.

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MAY 7 2012

Western Field Office
Adult Residential Licensing

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Carol Strejcek*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *CAROL STREJCEK - ADMINISTRATOR* Date *5/3/12*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 5-8-12 (Date)

Signature of Legal Entity Representative 5-8-12 (Date)

The above plan of correction was approved by ASP (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 43004 - 04/02/2012 - Miller-Linhart, Alden

1. REGULATION 55 Pa.Code §2600

2600.132(g) - Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

2. DESCRIPTION OF VIOLATION

During the fire drills on 6/04/2011 and 12/09/2011, 3 staff people participated in the drill. According to the home's administrator there are nights when the number of staff people on duty at this time is only 2.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. 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.

MIDNIGHT FIRE DRILLS ARE SUPERVISED BY THE MAINTENANCE DIRECTOR. ALL FUTURE MIDNIGHT FIRE DRILLS WILL CONTINUE TO BE SUPERVISED BY THE MAINTENANCE DIRECTOR AND HE WILL NOT COUNT HIMSELF AS A PARTICIPANT. ALL FUTURE MIDNIGHT FIRE DRILLS WILL BE CONDUCTED WHEN THERE ARE THE LEAST NUMBER OF STAFF MEMBERS SCHEDULED.
THE ADMINISTRATOR WILL MONITOR FOR COMPLIANCE OF FIRE DRILLS.

RECEIVED

MAY 7 2012

Western Field Office
Adult Residential Licensing

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Carol Strejcek*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *CAROL STREJCEK - ADMIN. STAFF* Date *5/3/12*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 5-8-12 (Date)

Signature of Legal Entity Representative 5-8-12 (Date)

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

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented