



Mailing Date: **NOV 28 2012**

Mr. Brian K. Hortert, CEO
Concordia Lutheran Ministries of Pittsburgh
1300 Bower Hill Road
Pittsburgh, Pennsylvania 15243

RE: Concordia of Franklin Park
1600 Georgetown Drive
Sewickley, Pennsylvania 15143

Dear Mr. Hortert:

As a result of the Department of Public Welfare's (Department) licensing inspection on September 6, 2012 and September 7, 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 Human Services Licensing so that compliance can be verified.

Sincerely,

A handwritten signature in black ink that reads "Maria Stepanovich". The signature is written in a cursive style with a large, stylized "M" and "S".

Maria Stepanovich
Regional Licensing Administrator

Enclosure(s)

Violation Report: 44363 - 09/06/2012 - Mazza, Larry

PCH Name: CONCORDIA OF FRANKLIN PARK

1. REGULATION 55 Pa.Code §2600

2600.15(a) - The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 - 10225.707) and 6 Pa. Code Sections 15.21 - 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Western Field Office

Adult Res in the home

2a. DESCRIPTION OF VIOLATION

On 9/1/12 between 4:15 PM and 5:15 PM, resident #1 went into the hallway to summon staff assistance for resident #2 who had indicated he/she hit the call bell about 15 minutes earlier. Staff member A entered the room and a few seconds later staff member B kicked open the bedroom door and then slammed the bathroom door shut. Staff member B began screaming at resident #1, "You can't do this. Stop screaming in the hallway." Staff member B then held his/her pager inches from resident #1's face and yelled, "Do you see resident #2's name on here? Resident #2 never rang the call bell." Resident #1 asked staff member B to leave the room but he/she continued to argue with resident #1 in the bedroom. This incident was not reported to the Area Agency on Aging until 9/4/12.

On 8/31/12 between 1:30 AM and 2:00 AM, resident #3 entered the medication room to ask which staff person was scheduled to shower him/her later that day. Staff members A and C were in the medication room at that time. When resident #3 was informed that staff member B was scheduled to shower him/her, the resident stated he/she did not want staff member B to shower him/her because he/she "Touches me inappropriately while providing care and spends an excessive amount of time cleaning me." This incident was not reported to the Area Agency on Aging until 9/4/12.

On 8/31/12, staff member C was the care manager on duty at the time resident #3 reported an allegation of abuse involving staff member B. Staff member C wrote a note to staff member D, the home's administrator, regarding this incident; however, the administrator did not receive the note until the morning of 9/4/12. Staff member C, who was the care manager at the time of the incident, did not submit an incident report to the Department within 24 hours as outlined in the home's reportable incident policy.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must 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.

A formal training was held with all employees by the Corporate Director of Nursing and the administrator. The training taught that if a nurses' aide hears of an accusation or if they witnessed abuse, they must report it to their supervisor immediately. Med techs and LPN's, who are the managers on duty and are the acting administrator during off-hours, were specifically trained on how to follow the process if they are unable to reach the administrator or director of nursing. (Report to Protective Services and DPW immediately by phone and fax Reportable Incident form within 24 hours to both entities). The aides, med techs, and LPNs were also trained that the resident should be removed from the abuse situation immediately and that the accused abuser should be suspended pending investigation by the LPN or med tech.

See Attachments A & B

See page 2A

Continued on next page...

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative (Required on EVERY Page) *Jill S. Treglia*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Jill S. Treglia* Date *10-4-12*

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

The above plan of correction is approved as of <u>11/26/12</u> (Date)	Plan of correction implementation status as of <u>11/26/12</u> (Date)
The above plan of correction was approved by <u>MS</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>MS</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

RECEIVED

Attachment A

Explanation continued re:

Western Field Office
Adult Residential Licensing

Violation: 2600. 15 (a) The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act...

Specific instructions on what to do in case of a report of abuse were posted in the medication room for the staff's reference. Annual training will be conducted by administrator or designee. The administrator will monitor compliance of completion of training.

Jill S. Treglia

Jill S. Treglia 10.4.12

MARIA STEPANOVICH (MS) 11/26/12

Regional Licensing Approval of Plan of Correction
maria stepanovich

RECEIVED

Violation Report: 44363 - 09/08/2012 - Mazza, Larry

PCH Name: CONCORDIA OF FRANKLIN PARK

NOV 20 2012

1. REGULATION 55 Pa.Code §2600

2600.15(a) - The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 - 10225.707) and 6 Pa. Code Sections 15.21 - 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

2a. DESCRIPTION OF VIOLATION

On 9/1/12 between 4:15 PM and 5:15 PM, resident #1 went into the hallway to summon staff assistance for resident #2 who had indicated he/she hit the call bell about 15 minutes earlier. Staff member A entered the room and a few seconds later staff member B kicked open the bedroom door and then slammed the bathroom door shut. Staff member B began screaming at resident #1, "You can't do this. Stop screaming in the hallway." Staff member B then held his/her pager inches from resident #1's face and yelled, "Do you see resident #2's name on here? Resident #2 never rang the call bell." Resident #1 asked staff member B to leave the room but he/she continued to argue with resident #1 in the bedroom. This incident was not reported to the Area Agency on Aging until 9/4/12.

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On 8/31/12, staff member C was the care manager on duty at the time resident #3 reported an allegation of abuse involving staff member B. Staff member C wrote a note to staff member D, the home's administrator, regarding this incident; however, the administrator did not receive the note until the morning of 9/4/12. Staff member C, who was the care manager at the time of the incident, did not submit an incident report to the Department within 24 hours as outlined in the home's reportable incident policy.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must 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.

By 11/15/12 - The administrator will conduct a quality management review to include the reportable incidents and condition reporting procedures. This review will include documentation of any incident trends found and measures implemented to prevent these incidents from occurring again. See attachment #1.

By 12/31/12 - All staff including management will receive training on reporting suspected abuse in accordance with OAPSA and abuse prevention by an outside source approved by the Department (such as Protective Services). Documentation will be kept. See attachments #2

We are continuing to train the employees who could not attend this training. All employees will be trained by 12-31-12. by receiving & reviewing the info given to us by Don Grant from P.S.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Jill S. Treglia*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Jill S. Treglia* Date *11-13-12*

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Violation Report: 44363 - 09/06/2012 - Mazza, Larry

PCH Name: CONCORDIA OF FRANKLIN PARK

1. REGULATION 55 Pa.Code §2600

2600.16(b) - The home shall develop and implement written policies and procedures on the prevention, reporting, notification, investigation and management of reportable incidents and conditions.

Western Field Office

2a. DESCRIPTION OF VIOLATION

The home's reportable incident policy indicates that, "If the incident occurs other than the time of Monday-Friday 8:00 AM-4:30 PM or the administrator is unavailable, the charge nurse or nursing assistant (care manager) is responsible for completing the reportable incident and condition form and faxing the written report to the Department's office within 24 hours." On 8/31/12, staff member C was the care manager on duty at the time resident #3 reported an allegation of abuse involving staff member B. Staff member C wrote a note to staff person D, the home's administrator, regarding this incident; however, it was not received by the administrator until the morning of 9/4/12. Staff member C did not submit an incident report to the Department within 24 hours as outlined in the home's policy.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must 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.

A formal training was held with all employees by the Corporate Director of Nursing and the administrator. This training included the review of the Abuse reporting policy. The training taught that if a nurses' aide hears of an accusation or if they witnessed abuse, they must report it to their supervisor immediately. Med techs and LPN's, who are the managers on duty and are the acting administrator during off-hours, were specifically trained on how to follow the process if they are unable to reach the administrator or director of nursing. . (Report to Protective Services and DPW immediately by phone and fax Reportable Incident form within 24 hours to both entities). The aides, med techs, and LPNs were also trained that the resident should be removed from the abuse situation immediately and that the accused abuser should be suspended pending investigation by the med tech or LPN.

Specific instructions on what to do in case of a report of abuse were posted in the medication room for the staff's reference.

Annual training on abuse reporting will be conducted by administrator or designee. The administrator will monitor compliance of completion of training.

See Attachments A and B

See page 3A

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page)	
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
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Violation Report: 44363 - 09/06/2012 - Mazza, Larry
PCH Name: CONCORDIA OF FRANKLIN PARK

NOV 20 2012

1. REGULATION 55 Pa.Code §2600

2600.16(b) - The home shall develop and implement written policies and procedures on the prevention, reporting, notification, investigation and management of reportable incidents and conditions.

Western Field Office
Adult Residential Licensing

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By 11/15/12 - The administrator will conduct a quality management review to include the reportable incidents and condition reporting procedures. This review will include documentation of any incident trends found and measures implemented to prevent these incidents from occurring again.

See attachment # 1

Staff had been re-educated on how & when to report. Our Resident Care Coordinator will review daily report with staff daily to monitor for any incidents that occurred overnight that could potentially need to be reported.

The administrator also calls into the facility on the weekends/days off to find out if there were any incidents/issues.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
(Required on EVERY Page) *Jill S. Treglia*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Jill S. Treglia* Date *11-13-12*

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Violation Report: 44363 - 09/06/2012 - Mazza, Larry
PCH Name: CONCORDIA OF FRANKLIN PARK

Western Field Office
Adult Residential Unit

1. REGULATION 55 Pa.Code §2600

2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law).

2a. DESCRIPTION OF VIOLATION

On 9/1/12 between 4:15 PM and 5:15 PM, resident #1 went into the hallway to summon staff assistance for resident #2 who had indicated he/she hit the call bell about 15 minutes earlier. Staff member A entered the room and a few seconds later staff member B kicked open the bedroom door and then slammed the bathroom door shut. Staff member B began screaming at resident #1, "You can't do this. Stop screaming in the hallway." Staff member B then held his/her pager inches from resident #1's face and yelled, "Do you see resident #2's name on here? Resident #2 never rang the call bell." Resident #1 asked staff member B to leave the room but he/she continued to argue with resident #1 in the bedroom. This incident was not reported to the Department until 9/4/12.

On 8/31/12 between 1:30 AM and 2:00 AM, resident #3 entered the medication room to ask which staff person was scheduled to shower him/her later that day. Staff members A and C were in the medication room at that time. When resident #3 was informed that staff member B was scheduled to shower him/her, the resident stated he/she did not want staff member B to shower him/her because he/she "Touches me inappropriately while providing care and spends an excessive amount of time cleaning me." This incident was not reported to the Department until 9/4/12.

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Specific instructions on what to do in case of a report of abuse were posted in the medication room for the staff's reference. Annual training on abuse reporting will be conducted by administrator or designee. The administrator will monitor compliance of completion of training.

See Attachments A & B

See page 4A

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page) *Julie Stegler*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Julie Stegler* Date *10-4-12*

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

The above plan of correction is approved as of 11/26/12 (Date)

Plan of correction implementation status as of 11/26/12 (Date)

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

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

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Violation Report: 44363 - 09/08/2012 - Mazza, Larry
 PCH Name: CONCORDIA OF FRANKLIN PARK

NOV 20 2012

1. REGULATION 55 Pa.Code §2600

2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law).

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On 8/31/12 between 1:30 AM and 2:00 AM, resident #3 entered the medication room to ask which staff person was scheduled to shower him/her later that day. Staff members A and C were in the medication room at that time. When resident #3 was informed that staff member B was scheduled to shower him/her, the resident stated he/she did not want staff member B to shower him/her because he/she "Touches me inappropriately while providing care and spends an excessive amount of time cleaning me." This incident was not reported to the Department until 9/4/12.

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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.

By 11/15/12 - The administrator will conduct a quality management review to include the reportable incidents and condition reporting procedures. This review will include documentation of any incident trends found and measures implemented to prevent these incidents from occurring again.

See attachment #1

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Jill S. Treglia*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Jill S. Treglia* Date *11-13-12*

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Violation Report: 44363 - 09/06/2012 - Mazza, Larry

PCH Name: CONCORDIA OF FRANKLIN PARK

1. REGULATION 55 Pa.Code §2600

2600.42(b) - A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Western Field Office
Licensing

2a. DESCRIPTION OF VIOLATION

On 9/1/12 between 4:15 PM and 5:15 PM, resident #1 went into the hallway to summon staff assistance for resident #2 who had indicated he/she hit the call bell about 15 minutes earlier. Staff member A entered the room and a few seconds later staff member B kicked open the bedroom door and then slammed the bathroom door shut. Staff member B began screaming at resident #1, "You can't do this. Stop screaming in the hallway." Staff member B then held his/her pager inches from resident #1's face and yelled, "Do you see resident #2's name on here? Resident #2 never rang the call bell." Resident #1 asked staff member B to leave the room but he/she continued to argue with resident #1 in the bedroom.

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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.

Resident rights were reviewed with staff by the administrator. Highlighted during this review were the rights indicated in the violation report - residents have the right to be free from neglect, intimidation, physical or verbal abuse, mistreatment, or being subjected to corporal punishment or disciplined in any way. Annual training on resident rights will be conducted by administrator or designee. The administrator will monitor compliance of completion of training.

See attachment C

See page 5A

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page)	<i>Jill S. Treglia</i>
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
Jill S. Treglia	10-4-12

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Violation Report: 44363 - 09/08/2012 - Mazza, Larry
FCH Name: CONCORDIA OF FRANKLIN PARK

NOV 20 2012

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3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must 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.

By 11/15/12 - The administrator will privately interview at least 3 residents a week for 3 months (different residents each week) to ensure residents are treated with dignity and respect and to ensure no residents are neglected, intimidated, physically or verbally abused, mistreated or disciplined in any way at any time. Documentation of interviews will be kept.

See attachment # 3. Interviews will continue.

By 12/31/12 - All staff including management will receive training in resident rights by an external training source approved by the Department. Documentation will be kept.

See attachments # 4

We are continuing to train the employees who could not attend this training. All employees will be trained by 12-31-12 by receiving & reviewing the info given to us by the ombudsman.

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page) *Jill S. Ireglia*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Jill S. Ireglia* Date *11-13-12*

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Violation Report: 44363 - 09/06/2012 - Mazza, Larry

PCH Name: CONCORDIA OF FRANKLIN PARK

1. REGULATION 55 Pa.Code §2600

2600.42(c) - A resident shall be treated with dignity and respect.

Western Field Office
Adult Residential Licensing

2a. DESCRIPTION OF VIOLATION

On numerous occasions, staff member B has kicked the bottom of resident #1's bed to awaken the resident for meals.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must 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.

Resident rights were reviewed with staff by the administrator. Highlighted during this review were the rights indicated in the violation report - residents have the right to be treated with dignity and respect. Annual training on resident rights will be conducted by administrator or designee. The administrator will monitor compliance of completion of training.

See attachment C

See page 6A

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Jill S. Treglia

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

Jill S. Treglia

Date *10-4-12*

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(Date)

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(Date)

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(Initials)

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Violation Report: 44363 - 09/06/2012 - Mazza, Larry
PCH Name: CONCORDIA OF FRANKLIN PARK

NOV 20 2012

1. REGULATION 55 Pa.Code §2600
2600.42(c) - A resident shall be treated with dignity and respect.

Visiting Field Office
Adult Residential Licensing

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See attachments #4

We are continuing to train the employees who could not attend this training. All employees will be trained by 12-31-12 by receiving the info & reviewing the info given to us by the ombudsman,



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Date(s) of Previous Violation(s):

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Jill S. Treglia

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

Jill S. Treglia

Date *11-13-12*

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(Date)

Plan of correction implementation status as of _____ (Date)

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

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