

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to CONCORDIA LUTHERAN MINISTRIES OF PITTSBURGH
LEGAL ENTITY

To operate CONCORDIA OF CRANBERRY
NAME OF FACILITY OR AGENCY

Located at 10 ADAMS RIDGE BOULEVARD, MARS, PA 16046
(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 84
(MAXIMUM CAPACITY)
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

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 January 31, 2013 until January 31, 2014,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 442580

Robert E. Robinson

ISSUING OFFICER

R. C. King

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



JAN 3 1 2013

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

RE: Concordia of Cranberry
10 Adams Ridge Boulevard
Mars, Pennsylvania 16046

Dear Mr. Hortert:

As a result of the Department of Public Welfare's (Department) licensing inspection on October 11, 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.

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

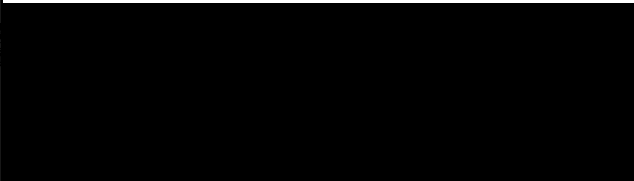
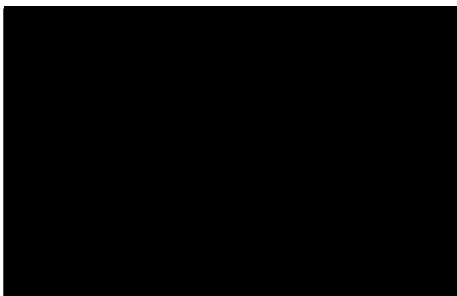
Sincerely,

A handwritten signature in black ink, appearing to read "R. Melusky".

Ronald Melusky
Director

Enclosures
License
Violation Report

VIOLATION REPORT RECEIVED
PERSONAL CARE HOMES - 55 Pa. Code Chapter 1200

PCH Name: CONCORDIA OF CRANBERRY		License Number: 442580
Address: 10 ADAMS RIDGE BOULEVARD, MARS, PA 16046		County: Butler
Administrator: Lisa Brooks		Region: WEST
Legal Entity Name: CONCORDIA LUTHERAN MINISTRIES OF PITTSBURGH <small>Western Field Office Adult Residential Licensing</small>		
Legal Entity Address: 1300 BOWER HILL ROAD, PITTSBURGH, PA 15243		
Certificate(s) of Occupancy		
C-2 LP 08/07/1997 Labor and Industry		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 81	Waking Staff: 61
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal, Incident		
On-Site Inspections Dates and Department Representatives On-Site 10/11/2012: Garrigan, Laurie; Mazza, Larry		
Off-Site Inspection Dates and Inspectors, If Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 84 Number of Residents Served: 71 Secured Dementia Care Unit In Home: No Area: Secured Dementia Unit Capacity, If Applicable: 	Number of Residents who: 	

NOV 5 2012

Violation Report: 44258 - 10/11/2012 - Garrigan, Laurie
PCH Name: CONCORDIA OF CRANBERRY

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).

Western Field Office
Adult Residential Licensing

2a. DESCRIPTION OF VIOLATION

On 10/5/12, resident #1 fell out of bed and was sent to the hospital. Hospital records indicate the resident fractured a rib. This incident was not reported to the Department.

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 has a history of fractured ribs which is noted in [redacted] chart. The information available was not clear about the status of prior fractures. Reportable was sent on 10/15/12.

Administrator re-educated staff regarding 2600.16 and what situations must be reported to the Department. Administrator will complete an initial reportable each time a resident is sent to the hospital, flag the initial report, and send a final report once information is received from the hospital.

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

Signature of Legal Entity Representative (Required on EVERY Page) *Lisa Brooks*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) **LISA BROOKS - ADMINISTRATOR** Date **11/5/12**

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

The above plan of correction is approved as of 12/25/12 (Date)

Plan of correction implementation status as of 12/28/12 (Date)

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

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

Violation Report: 44268 - 10/11/2012 - Garrigan, Laurie
PCH Name: CONCORDIA OF GRANBERRY

NOV 5 2012

1. REGULATION 55 Pa.Code §2600

Western Field Office

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

2a. DESCRIPTION OF VIOLATION

Staff person A stole resident #1's credit card which was used to make purchases at Wal-Mart. The bank reported unusual activity on the credit card on 11/22/11.

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.

Dispute this as a violation.

The employee had a criminal background check completed prior to hire. The police and the Department were notified. Employee was terminated as soon as her identity was confirmed. This was not a preventable incident and there is no plan of correction other than to continue the appropriate hiring practice of completing pre-hire criminal background checks and fingerprints as indicated.

Staff persons received training in resident rights on
12/19/12.
ms 12/25/12

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Lisa Brooks

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

LISA Brooks - Administrator

Date 11/5/12

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(Date)

Plan of correction implementation status as of 12/25/12
(Date)

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

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

Violation Report: 44258 - 10/11/2012 - Garrigan, Laurie
 PCH Name: CONCORDIA OF CRANBERRY

NCV 5 2012

1. REGULATION 55 Pa.Code §2600
 2600.85(a) - Sanitary conditions shall be maintained.

Western Field Office
 Adult Residential Licensing

2a. DESCRIPTION OF VIOLATION
 There were 3 used, unlabeled towels on the sink in shared bedroom C-8. There were no paper towels, mechanical air blower or other means of safe hand drying in this bathroom.

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.

Dispute this as a violation.

The towel racks in the room were labeled with the residents' names. The residents in the shared room are cognitively impaired. There are showers in the room and therefore towels are available. Paper towels were not an appropriate hand-drying option for these residents. They also would not understand how to use an electric hand dryer. Hand sanitizer would also be unsafe due to risk of ingestion. It is unreasonable to expect cognitively-impaired residents to consistently hang up their towels and it is not possible to assign a staff member to residents in shared rooms to monitor the towels.

Staff checks the bathroom cited each hour for sanitary conditions to ensure common towels are not shared. By 1/25/13 - the administrator or designated staff person will consult with a physician or other medical health care professionals regarding appropriate hand drying means for the 2 residents who use the bathroom in bedroom C-8. MS 12/25/12

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Lisa Brooks*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *LISA BROOKS - Administrator* Date *11/5/12*

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The above plan of correction was approved by <u>MS</u> (Initials)	<input type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input checked="" type="checkbox"/> Partially Implemented - Inadequate Progress MS <input type="checkbox"/> Not Implemented

Violation Report: 44268 - 10/11/2012 - Garrigan, Laurie
PCH Name: CONCORDIA OF CRANBERRY

11/5/2012

1. REGULATION 55 Pa.Code §2600

2600.89(b) - Hot water temperature in areas accessible to the resident may not exceed 120°F
Western Field Office
Residential Licensing

2a. DESCRIPTION OF VIOLATION

At 10:40 AM, the hot water temperature was 125.0 degrees Fahrenheit in the public restroom next to the Wellness Center.

At 10:50 AM, the hot water temperature was 127.4 degrees Fahrenheit in the public restroom next to the "A" hall dining room.

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.

The mixing valve was adjusted at time of inspection. The Department temped the water prior to departure and recorded temperatures of 116.2 degrees in the E Hall bathroom and 117.8 degrees in the A Hall bathroom.

New thermometers were purchased and the process for taking water temperatures was reviewed with all staff. Administrator will review temperature logs weekly and complete random water temps monthly. See attached water temperature log.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Lisa Brooks

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

LISA Brooks-Administrator

Date 11/5/12

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(Date)

Plan of correction implementation status as of 12/28/12
(Date)

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(Initials)

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Violation Report: 44258 - 10/11/2012 - Garrigan, Laurie
PCH Name: CONCORDIA OF CRANBERRY

Western Field Office
Adult Residential Licensing

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.

2a. DESCRIPTION OF VIOLATION

There were no emergency telephone numbers posted on or near resident #2's telephone.

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.

The emergency numbers in resident #2's room were present on a sticker on the receiver of the phone. See attached photo. All emergency numbers are posted on resident phones.

Resident care coordinator will conduct room inspections weekly ensuring that emergency phone numbers are present on all phones. Administrator will review room inspection monitors monthly.

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

Signature of Legal Entity Representative (Required on EVERY Page) *Lisa Brooks*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *LISA Brooks - Administrator* Date *11/5/12*

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- Not Implemented

NOV 5 2012

Violation Report: 44258 - 10/11/2012 - Garrigan, Laurie
PCH Name: CONCORDIA OF CRANBERRY

1. REGULATION 55 Pa.Code §2600

Western Field Office
Adult Residential Licensing

2600.105(g)(1) - To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.

2a. DESCRIPTION OF VIOLATION

There was an approximate 1/4" accumulation of lint in the lint trap of the empty dryer in the laundry room adjacent to bedroom F-9.

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.

Lint was immediately removed from dryer at time of inspection. Other five dryers were free of lint. Staff was re-educated regarding the importance of removing dryer lint after each use. Daily lint logs were placed in all laundry rooms requiring staff to initial after each load. Maintenance coordinator and Administrator will review lint logs daily and complete spot checks on dryers to ensure that lint is removed after each load. See lint log attached.

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Lisa Brooks*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *LISA Brooks-Administrator* Date *11/5/12*

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(Date)

Plan of correction implementation status as of 12/28/12
(Date)

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(Initials)

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Violation Report: 44258 - 10/11/2012 - Garrigan, Laurie
PCH Name: CONCORDIA OF CRANBERRY

1. REGULATION 55 Pa.Code §2600

2600.141(a)(2) - The medical evaluation must include the following: (1) through (10)

Western Field Office
Adult Residential Licensing

2a. DESCRIPTION OF VIOLATION

The medical evaluation for resident #3, dated 3/5/12, does not address special health or dietary needs of the resident. None of the boxes in this section of the medical evaluation are checked.

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 new medical evaluation was completed for resident #3 including the special health or dietary needs of the resident. Staff was re-educated about making sure medical evaluations are completed thoroughly.

Resident care coordinator will conduct weekly audits of medical evaluations and RASPs to make sure they are completed thoroughly. Administrator will review audit sheets monthly and will complete random audits of medical evaluations and RASPs.

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Lisa Brooks*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *LISA BROOKS - Administrator* Date *11/5/12*

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(Date)

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- Partially Implemented - Inadequate Progress
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Violation Report: 44258 - 10/11/2012 - Garrigan, Laurie
 FCH Name: CONCORDIA OF CRANBERRY

1. REGULATION 55 Pa.Code §2600

2600.183(f) - Prescription medications, OTC medications and CAM that are discontinued, expired or for residents who are no longer served at the home shall be destroyed in a safe manner according to the Department of Environmental Protection and Federal and State regulations. When a resident permanently leaves the home, the resident's medications shall be given to the resident, the designated person, if any, or the person or entity taking responsibility for the new placement on the day of departure from the home.

Western Field Office
 Adult Residential

2a. DESCRIPTION OF VIOLATION

Resident #2's prescription for Glyburide, 5 mg - take 2 tablets twice daily was discontinued on 5/2/12; however, it was still in the medication cart.

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.

Medication was removed from the cart immediately. Nurses and medication technicians were re-educated regarding the process of immediately removing medications from the cart when a medication is discontinued.

Resident care coordinator will conduct weekly medication cart audits and provide audit sheets to Administrator. Administrator will review cart audit sheets weekly. Administrator will conduct random cart audits monthly. The pharmacy quality nurse will conduct quarterly cart audits and provide results to the resident care coordinator and administrator.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Lisa Brooks - Administrator* Date *11/5/12*

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