



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

DEC 10 2013

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

RE: Concordia of Cranberry
10 Adams Ridge Boulevard
Mars, Pennsylvania 16046
License #: 442580

Dear Mr. Hortert:

As a result of the Department of Public Welfare's (Department) licensing inspection on October 22, 2013, of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary 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.

Your regular license for the period January 31, 2014 to January 31, 2015 was issued on October 16, 2013. Your regular license remains in good standing.

Sincerely,

Matthew J. Jones ^{SOVP}

Matthew J. Jones
Acting Director

Enclosure
License Inspection Summary

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

PCH Name: CONCORDIA OF CRANBERRY		License Number: 44258
Address: 10 ADAMS RIDGE BOULEVARD, MARS, PA 16046		County: Butler
Administrator: Lisa Brooks		Region: WEST
Legal Entity Name: CONCORDIA LUTHERAN MINISTRIES OF PITTSBURGH		
Legal Entity Address: 1300 BOWER HILL ROAD, PITTSBURGH, PA 15243		
Certificate(s) of Occupancy C-2 LP 03/12/1998 L&I		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 82	Waking Staff: 82
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 10/22/2013: Gildden, Michelle; Williams, Jason		
Off-Site Inspection Dates and Inspectors, if Applicable		
<p>RECEIVED</p> <p>NOV 22 2013</p> <p>WEST REGION FIELD OFFICE Human Services Licensing</p>		
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 Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 9 Number of Hospice Residents in past year: 22	Number of Residents who: Receive Supplemental Security Income: 0 Are 80 Years of Age or Older: 71 Have Mental Illness: 1 Have an Intellectual Disability: 0 Have a Mobility Need: 11 Have a Physical Disability: 0	

Violation Report: 44258 - 10/22/2013 - Gliddon, Michelle
 PCH Name: CONCORDIA OF CRANBERRY

1. REGULATION 55 Pa.Code §2800
 2800.125(a) - Combustible and flammable materials may not be located near heat sources or hot water heaters.

2a. DESCRIPTION OF VIOLATION
 There was a red towel against the pipe, behind the dryer, in the C hall laundry 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.

Cloth napkin was immediately removed from behind the dryer at time of inspection. This is one dryer out of six in the facility. Other five did not have anything behind them. Load of cloth napkins just removed from dryer at time of inspection.

Staff have in place a log to sign off for removing dryer lint twice per shift. We added to the log that the staff should check behind the washer and dryer for any loose items when they are removing the lint. Log is attached—"Attachment A"

Housekeeping will review logs daily. Maintenance will audit weekly and administrator will audit logs monthly.

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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 *11/22/13*

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

The above plan of correction is approved as of <u>11/22/13</u> (Date)	Plan of correction implementation status as of <u>11/22/13</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

Violation Report: 44268 - 10/22/2013 - Glidden, Michelle
 PCH Name: CONCORDIA OF CRANBERRY

1. REGULATION 65 Pa.Code §2600

2600.132(c) - A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

2a. DESCRIPTION OF VIOLATION

Not all residents of the home evacuated to a designated meeting place away from the building or within a fire-safe area, during the fire drill conducted on 8/21/13 at 3:46 PM. Residents in the A and B halls remained in their rooms.

However, the home's fire drill record indicates all residents in the home, at the time of the drill on 8/21/13 at 3:45 PM, were evacuated.

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:

On 8/21/13, the home encountered a problem with the fire drill. In the problem column on the Department's fire drill record, the maintenance employee listed that all residents did not evacuate—"Attachment C". He made a documentation oversight in the column listing number of residents evacuated. It is clear by his documentation in the problem column that his intent was not to provide false documentation of the number of resident's evacuated but rather made a documentation oversight due to never having had this problem with a fire drill. The home respectfully requests this violation be withdrawn.

*Withdrawn
ms 11/22/13*

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Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Lisa Brooks - Administrator</i>			Date <i>11/22/13</i>
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Violation Report: 44268 - 10/22/2013 - Glidden, Michelle
 PCH Name: CONCORDIA OF CRANBERRY

1. REGULATION 68 Pa.Code §2600
 2600.132(h) - Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

2a. DESCRIPTION OF VIOLATION
 Not all residents of the home evacuated to a designated meeting place away from the building or within a fire-safe area, during the fire drill conducted on 8/21/13 at 3:46 PM. Residents in the A and B halls remained in their rooms.

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:

Problems were encountered with the 8/21/13 fire drill. Residents in A and B hall were prepared to evacuate but remained in their rooms. We identified this as a problem with the drill and noted it on the DPW fire drill record, as instructed to do in 2600.132. We repeated a fire drill for the month of August 2013 without any problems. On 9/4/13, all staff were retrained in fire evacuation procedures—"Attachment B". Subsequent to the drill on 8/21/13, four fire drills were conducted without any problems. Prior to 8/21/13, there were no issues with any fire drills. There is no pattern of problems with fire drills, the home followed the regulation by recording the problem with the fire drill, all staff were retrained, and additional fire drills conducted to ensure proper understanding of the procedure. The home respectfully requests this violation be withdrawn.

By 11/22/13 - A designated staff person will monitor fire drills to ensure all residents of the home evacuate to a designated meeting place away from the building or within a fire-safe area.
 ms 11/22/13

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