



pennsylvania
DEPARTMENT OF HUMAN SERVICES

OCT 18 2016

Ms. Jill Treglia, Administrator
Concordia Lutheran Ministries of Pittsburgh
125 Brown Road
Wexford, Pennsylvania 15090

RE: Concordia of Wexford
License #: 443620

Dear Ms. Treglia:

As a result of the Department of Human Services' annual licensing inspection on June 6, 2016 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.

Sincerely,

A handwritten signature in blue ink, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

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

PCH Name: CONCORDIA OF WEXFORD		License Number: 44362
Address: 125 BROWN ROAD, WEXFORD, PA 15090		County: Allegheny
Administrator: Jill Treglia		Region: WEST
Legal Entity Name: CONCORDIA LUTHERAN MINISTRIES OF PITTSBURGH		
Legal Entity Address: 125 BROWN ROAD, WEXFORD, PA 15090		RECEIVED
Certificate(s) of Occupancy C-2 LP 03/15/1994 PAL & I		SEP 08 2016 WEST REGION FIELD OFFICE Human Services Licensing
Staffing Hours		
Resident Support: 0	Total Daily Staff: 47	Waking Staff: 35
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 08/08/2016: Kneec, Donald; Daerr, Alicia		
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: 58 Number of Residents Served: 38 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: 7 Number of Hospice Residents in past year: 20		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 38 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 9 Have a Physical Disability: 0

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Violation Report: 44382 - 06/06/2016 - Knee, Donald
PCH Name: CONCORDIA OF WEXFORD

SEP 08 2016

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa. Code §2600

2600.17 - Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

2a. DESCRIPTION OF VIOLATION

At approximately 10:55 a.m., there were resident records, to include current prescription orders for residents #1, #2 and #3 unlocked, unattended and accessible on the bookshelf in the building coordinator's office.

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.

- All employees with access to this door will be re-trained on HIPPA and that all resident information needs to be kept locked. This training will be done by the administrator by September 16, 2016. Documentation of this training shall be kept.

Immediately - A designated staff person on each shift will monitor the home daily to ensure all resident records to include prescription orders are confidential, kept safe and locked. *SM 9/8/16*

Repeat Violation: Yes	Date(s) of Previous Violation(s):	06/11/2014	
Signature of Legal Entity Representative (Required on EVERY Page)		<i>Joe Streglia</i>	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)		Date	
<i>Jill S. Treglia</i>		<i>9-8-16</i>	
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!			
The above plan of correction is approved as of		Plan of correction implementation status as of	
<i>9-8-16</i> (Date)		<i>9-8-16</i> (Date)	
The above plan of correction was approved by		<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>SM</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented	
<i>SM</i> (Initials)			

RECEIVED

SEP 08 2016

Violation Report: 44362 - 06/06/2016 - Knee, Donald
PCH Name: CONCORDIA OF WEXFORD

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 65 Pa.Code §2600

2600.54(a) - Direct care staff persons shall have the following qualifications:

- (1) Be 18 years of age or older, except as permitted in § 2600.54(b).
- (2) Have a high school diploma, GED diploma, or active registry status on the Pennsylvania nurse aide registry.
- (3) Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary personal care services with reasonable skill and safety.

2a. DESCRIPTION OF VIOLATION

Direct care staff person A, hired [redacted]/16, does not have a high school diploma, GED diploma, or active registry status on the Pennsylvania nurse aide registry.

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.

- 2. Direct care staff person A brought in her high school transcript, which is enclosed along with this violation report. In the future, Human Resources will ensure that all employees have these documents on file immediately upon hire. A monthly audit of new employees will be done by the administrator or designee to ensure all paperwork is present. Documentation of this audit will be kept.

Within 15 days of receipt of the plan of correction, the administrator or designated staff person will review all direct care staff records to ensure all direct care staff persons meet the qualifications in accordance with regulation 2600.54(a) prior to providing direct care services. Any direct care staff persons identified as unqualified through this review process will be immediately removed from providing direct care to the residents until qualifications under regulation 2600.54(a) have been met. *9/8/16*

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Jill S. Treglia* Date *9/8/16*

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The above plan of correction is approved as of <u>9-8-16</u> (Date)	Plan of correction implementation status as of <u>9-8-16</u> (Date)
The above plan of correction was approved by <u>SWP</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>SWP</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented