

Department of Human Services
Bureau of Human Service Licensing

October 19, 2020

HAL WALDMAN, OWNER
NORBERT INC
1326 FREEPORT ROAD, SUITE 100
PITTSBURGH, PA 15238

RE: NORBERT RESIDENTIAL CARE
FACILITY
2413 ST. NORBERT DRIVE
PITTSBURGH, PA, 15234
LICENSE/COC#: 43051

Dear Mr. Waldman,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/23/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Larry Mazza

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC**

Facility Information

Name: *NORBERT RESIDENTIAL CARE FACILITY* License #: *43051* License Expiration Date: *06/12/2020*
 Address: *2413 ST. NORBERT DRIVE, PITTSBURGH, PA 15234*
 County: *ALLEGHENY* Region: *WESTERN*

Administrator

Name: *Janet Torregrosso* Phone: *4128855202* Email: *JTORREGROSSO@norbertpersonalcare.com*

Legal Entity

Name: *NORBERT INC*
 Address: *1326 FREEPORT ROAD, SUITE 100, PITTSBURGH, PA, 15238*
 Phone: *4128855202* Email: *HWALDMAN@WALDMANINC.COM*

Certificate(s) of Occupancy

Type: *I-2* Date: *03/09/2010* Issued By: *City of Pittsburgh*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *94* Waking Staff: *71*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: *10/07/2020*

Inspection Dates and Department Representative

09/23/2020 - On-Site: Amy Duncan

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *102* Residents Served: *69*

Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

Hospice

Current Residents: *7*

Number of Residents Who:

Receive Supplemental Security Income: *4* Are 60 Years of Age or Older: *68*
 Diagnosed with Mental Illness: *7* Diagnosed with Intellectual Disability: *1*
 Have Mobility Need: *25* Have Physical Disability: *0*

Inspections / Reviews

09/23/2020 - Partial

Lead Inspector: *Amy Duncan* Follow-Up Type: *POC Submission* Follow-Up Date: *10/17/2020*

Inspections / Reviews *(continued)*

10/13/2020 - POC Submission

Lead Reviewer: *Larry Mazza*Follow-Up Type: *POC Submission*Follow-Up Date: *10/19/2020*

10/16/2020 - POC Submission

Lead Reviewer: *Larry Mazza*Follow-Up Type: *Document Submission*Follow-Up Date: *10/20/2020*

10/19/2020 - Document Submission

Lead Reviewer: *Larry Mazza*Follow-Up Type: *Not Required*

225c - Additional Assessment

1. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

1. Annually.

Description of Repeat Violation

Resident #1's most recent assessment was completed on 8/21/20; however, the previous assessment was completed on 6/14/19.

Resident #1 is a fall risk and has had approximately 15 falls in the home since January 2020. Resident #1's most recent assessment, dated 8/21/20, indicates she has a moderate problem with judgement, and the description of the service need on resident's most recent support plan, dated 8/21/20, states, "Judgment impaired to make quick irrational choices such as transferring herself alone and has multiple falls." However, the plan to meet the need states, "Try to redirect resident before situation escalates."

REPEAT VIOLATION: 10/22/2019, et. al.

Plan of Correction

Accept

9/23/2020 The RASP was updated to reflect history of falls.

9/23/2020 hourly checks were initiated due to residents poor safety awareness and are completed and documented by RCG ongoing.

9/23/2020 Doctor visit scheduled for review on 10/01/2020

10/01/2020 DME obtained for significant change . New orders for Hospice.

10/01/2020 New RASP completed to reflect current picture of resident.

10/2/2020 High back wheelchair, low boy bed, fall matts, and bedside table all in place .

10/12/2020 An Audit of all RASP was completed by the RCC to ensure all completion dates are logged and calendared for completion within proper timeframes.

10/12/2020 All RASP will be completed according to the calendar and within the time frame moving forward.

10/12/2020 Any new admissions will be added to RASP completion calendar at time of admission.

10/12/2020 To ensure on going compliance an audit ill be preformed monthly x3 by the 15th of each month Nov, Dec, Jan then quarterly after that.

10/12/2020 Results will be reported at QM meeting to ensure on going compliance.

Completion Date: 10/16/2020

Document Submission

Implemented

POC already submitted.