

Department of Human Services  
Bureau of Human Service Licensing

June 30, 2021

[REDACTED] ADMINISTRATOR  
VINCENTIAN HOME INC  
111 PERRYMONT ROAD  
ATTN LYSETTE KAMZELSKI  
PITTSBURGH, PA 15237

RE: VINCENTIAN HOME  
111 PERRYMONT ROAD  
PITTSBURGH, PA, 15237  
LICENSE/COC#: 43153

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/11/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Jason Williams

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: *VINCENTIAN HOME* License #: *43153* License Expiration Date: *10/27/2021*  
Address: *111 PERRYMONT ROAD, PITTSBURGH, PA 15237*  
County: *ALLEGHENY* Region: *WESTERN*

**Administrator**

Name: [REDACTED] Phone: *412-328-7300* Email: [REDACTED]

**Legal Entity**

Name: *VINCENTIAN HOME INC*  
Address: *111 PERRYMONT ROAD, ATTN LYSETTE KAMZELSKI, PITTSBURGH, PA, 15237*  
Phone: *412-328-7300* Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *04/11/1997* Issued By: *L&I*

**Staffing Hours**

Resident Support Staff: Total Daily Staff: *49* Working Staff: *37*

**Inspection**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Incident* Exit Conference Date: *03/11/2021*

**Inspection Dates and Department Representative**

03/11/2021 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *60* Residents Served: *40*

**Secured Dementia Care Unit**

In Home: *Yes* Area: *Memory Lane* Capacity: *10* Residents Served: *7*

**Hospice**

Current Residents: *0*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *40*  
Diagnosed with Mental Illness: *2* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *9* Have Physical Disability: *0*

**Inspections / Reviews**

03/11/2021 Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/06/2021*

Inspections / Reviews *(continued)*

5/6/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow Up Type: *Document Submission*

Follow-Up Date: *05/10/2021*

6/30/2021 Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

## 42c - Treatment of Residents

### 1. Requirements

2600.

42.c. A resident shall be treated with dignity and respect.

#### Description of Violation

*On 3/6/2021, at approximately 5:00 p.m., staff person A was pushing a dining cart into the dining room after serving dinner. Staff person A encountered resident #1 walking in the hallway in front of the dining cart. Staff person A angrily yelled at resident #1 to move and threatened to hit resident #1 with the dining cart. Staff persons B and C were in the dining room and overheard staff person A yelling at and threatening resident #1.*

#### Plan of Correction

**Accept**

*Staff Person was terminated from facility (attachment #1). Facility will conduct 6 resident interviews per selected day to ensure that residents are treated with dignity and respect. Interviews will be conducted 4/28/21, 4/30/21, 5/3/21 and 5/5/21 (attachment #2). Mandatory staff training took place on 4/29/21 regarding regulation 42.C. (Attachment #3). Relias education module training was added to employees training plan due on 5/6/21. (Attachment #4).*

**Completion Date:** 05/05/2021

#### Document Submission

**Implemented**

*Plan of Correction has been completed as of 5/6/21*