

Department of Human Services  
Bureau of Human Service Licensing

July 6, 2021

[REDACTED] PRESIDENT  
NORBERT INC  
1326 FREEPORT ROAD, SUITE 100  
PITTSBURGH, PA 15238

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

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/09/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Janine Wenzig

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services  
Bureau of Human Service Licensing

July 2, 2021

██████████ PRESIDENT  
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 ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 06/09/2021 of the above facility, the citations specified on the enclosed Licensing Inspection Summary (LIS) were found.

We have determined that your plan of correction is: Acceptable

All citations specified on the plan of correction must be corrected by the dates specified on the License Inspection Summary (violation report) and continued compliance with Department statutes and regulations must be maintained.

Sincerely,  
Janine Wenzig

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      **Licen e #:** 43051      **Licen e Expiration Date:** 12/16/2021  
**Addr e :** 2413 ST NORBERT DRIVE, PITTSBURGH, PA 15234  
**County:** ALLEGHENY      **Region:** WESTERN

**Administrator**

**Name:** [REDACTED]      **Phone:** 4127796986      **Email:** [REDACTED]

**Legal Entity**

**Name:** NORBERT INC  
**Address:** 1326 FREEPORT ROAD, SUITE 100, PITTSBURGH, PA, 15238  
**Phone:** 4128855202      **Email:** [REDACTED]

**Certificate(s) of Occupancy**

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

**Staffing Hours**

**Re ident Support Staff:** 0      **Total Daily Staff:** 74      **Waking Staff:** 56

**Inspection**

**Type:** Partial      **Notice:** Unannounced      **BHA Docket #:**  
**Reason:** Complaint      **Exit Conference Date:** 06/09/2021

**Inspection Dates and Department Representative**

06/09/2021 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 102      **Residents Served:** 51

**Secured Dementia Care Unit**

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

**Hospice**

**Current Residents:** 51

**Number of Residents Who:**

**Receive Supplemental Security Income:** 0      **Are 60 Years of Age or Older:** 51  
**Diagnosed with Mental Illness:** 7      **Diagnosed with Intellectual Disability:** 0  
**Have Mobility Need:** 23      **Have Physical Disability:** 0

**Inspections / Reviews**

06/09/2021 Partial

**Lead Inspector:** [REDACTED]      **Follow-Up Type:** POC Submission      **Follow-Up Date:** 06/24/2021

Inspections / Reviews *(continued)*

7/2/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow Up Type: *Document Submission*Follow-Up Date: *07/06/2021*

7/6/2021 Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

16c - Written Incident Report

1. Requirements

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 § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

*On 6/1/21, a representative of Protective Services informed staff person A, the Administrator, of an allegation of neglect of resident #1's care. The home did not report this allegation to the Department.*

Plan of Correction

Accept

*The representative from Protective Services did not indicate to the Administrator that there was any report of abuse/neglect and rather made an introduction and asked to review resident documents. Administrator/Director of Nursing or designee will ensure future reporting occurs promptly in compliance with regulation any time Protective Services reaches out to a facility representative. An informal educational session was held by the administrator on 6/9 with himself and the Director of Nursing regarding mandatory reporting. See attachment.*

Completion Date: 06/25/2021

Document Submission

Implemented

Accepted

42r Visitation

1. Requirements

2600.

- 42.r. A resident has the right to receive visitors for a minimum of 12 hours daily, 7 days per week.

Description of Violation

*On 6/7/21, a member of resident #2's family was denied face-to-face visitation with the resident and told not to come back. Resident #2 wishes to have face-to-face visitation with this family member.*

Plan of Correction

Accept

*Resident #2 permitted visits with family member in question and has been permitted to go on "outings" with this same family member following visit by surveyor. Proof of this available upon request. All residents will continued to be permitted visitors in accordance with Department and Norbert Personal Care Home policies.*

Completion Date 07/02/2021

Document Submission

Implemented

Accepted

121a - Unobstructed Egress

1. Requirements

2600.

- 121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

121a - Unobstructed Egress (continued)

**Description of Violation**

There is a 2" by 4" board across the door leading out of the exterior fenced smoking area making it very difficult to open.

**Plan of Correction**

**Accept**

Deputy Fire Marshal for the City of Pittsburgh [REDACTED] visited the facility after the request of facility Administrator following visit and he stated that the exterior fenced smoking area door is not a true means of egress due to the embankment and safety risk on the other side of the door. The "EXIT" sign cited by the surveyor has been changed to indicate the exit up the stairs of the A building and is now in compliance according to this Deputy Fire Marshal. Further, a sign has been placed on the door to the smoking area stating: "THIS IS NOT AN EXIT"

Completion Date: 07/02/2021

**Document Submission**

**Implemented**

Accepted

133.1 - Exit Signs

**1. Requirements**

2600.

133.1. Exit Signs - The following requirements apply for a home serving nine or more residents: Signs bearing the word "EXIT" in plain legible letters shall be placed at all exits.

**Description of Violation**

There is no exit sign over the fire exit door from the 4th floor hallway by the elevator to the outside smoking area. The fire diagram indicates this door is an emergency exit, and there is a sign directing to this exit in the long hallway. The home currently serves 51 residents.

**Plan of Correction**

**Accept**

See above for 121A regarding conversation with fire safety expert. Exit sign has been changed according to coding and policy of the Department of Public Safety Bureau of Fire and Deputy Fire Marshal [REDACTED] Additionally, a sign has been placed on the door to the smoking area stating: "THIS IS NOT AN EXIT"

Completion Date: 07/02/2021

**Document Submission**

**Implemented**

Accepted