

Department of Human Services
Bureau of Human Service Licensing

January 26, 2022

[REDACTED]

REBECCA RESIDENCE
3746 CEDAR RIDGE ROAD
ALLISON PARK, PA, 15101

RE: CONCORDIA AT REBECCA
RESIDENCE
3746 CEDAR RIDGE ROAD
ALLISON PARK, PA, 15101
LICENSE/COC#: 43007

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/06/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Jon Kimberland

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY

Facility Information

Name: *CONCORDIA AT REBECCA RESIDENCE* License #: *43007* License Expiration: *03/08/2022*
Address: *3746 CEDAR RIDGE ROAD, ALLISON PARK, PA 15101*
County: *ALLEGHENY* Region: *WESTERN*

Administrator

Name: [REDACTED] Phone: *7244440600* Email: [REDACTED]

Legal Entity

Name: *REBECCA RESIDENCE*
Address: *3746 CEDAR RIDGE ROAD, ALLISON PARK, PA, 15101*
Phone: *7244440600* Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *09/13/1999* Issued By: *L & I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *72* Waking Staff: *54*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint* Exit Conference Date: *01/06/2022*

Inspection Dates and Department Representative

01/06/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *65* Residents Served: *57*

Secured Dementia Care Unit

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

Hospice

Current Residents: *6*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *57*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *15* Have Physical Disability: *1*

Inspections / Reviews

01/06/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *01/21/2022*

Inspections / Reviews (*continued*)

01/24/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *01/26/2022*

01/25/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *01/27/2022*

01/26/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

227c - Support Plan Revision

1. Requirements

2600.

227.c. The support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident’s needs as indicated on the current assessment.

Description of Violation

Resident #1’s support plan, dated [REDACTED] had not been updated to include the changes in cognitive behaviors, supervision/wandering needs and increased incontinence care. Staff interviews indicated over the past several months resident #1 wanders in/out of other resident’s rooms, taking and eating their candy and snacks and taking personal items, often throwing items onto the hallway floor, blocks the doors open to the garden and pond with books, putting residents with wander guards at risk of elopement and is unable to verbalize why. The resident requires total assist of staff persons for all toileting needs and incontinence care of bowel and bladder. Otherwise, interviews indicate the resident will remove briefs/pull-ups and come out of room naked, often urinating over wheelchair and clothing, has been putting soiled dirty clothing back into dresser drawers with clean clothing.

Plan of Correction

Do Not Accept

The facility has had rapid turnover in both Administrator and Resident Care Coordinator positions over the past 6 months to a year. These two positions are solely responsible for the upkeep of DHS forms for the home. The two positions have recently been filled with long-term Concordia employees. While facing the ever-growing burden of the COVID-19 pandemic, this new Administrator and Resident Care Coordinator are eager to ensure residents’ current and changing care needs are efficiently and effectively communicated to Direct Care Staff and supportive departments. The Administrator has recently developed a “Resident Matrix” that would serve as a quick and accurate reference for the resident care needs that are reflected on the Resident Assessment Support Plan. Residents’ current care needs will be reviewed and reflected on the Resident Matrix as a working document and updated daily. Once the data has been thoroughly compiled and updated into the matrix document, the Administrator plans to submit the Resident Matrix to DHS for review of RASP waiver, at the suggestion of the complaint investigation surveyor, [REDACTED]. While this data is being collected, refined, and entered into the Resident Matrix, the Resident Care Coordinator will audit resident RASPs for accuracy according to planned annual scheduling, and monitor residents for significant changes that warrant a RASP update. Resident RASP tracker is attached as evidence of our recent improvements and was included in our Plan of Correction submitted November 15, 2021. A blank copy of the Resident Matrix has also been attached for your review and reference. This is not the completed version, nor will it reflect actual resident data at this time, but the Department’s thoughts and suggestions on improvements would be welcome. The home intends to submit the Resident Matrix for consideration for waiver on or before July 1st, 2022.

Plan of Correction

Accept

Resident #1 was discharged on [REDACTED] so [REDACTED] service plan cannot be updated to reflect the changes.

Document Submission

Implemented

See attached.