

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

December 18, 2023

[REDACTED], ADMINISTRATOR
VINCENTIAN HOME INC
111 PERRYMONT ROAD
ATTN MICHELE DOLBY
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 10/30/2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: VINCENTIAN HOME **License #:** 43153 **License Expiration:** 10/27/2024
Address: 111 PERRYMONT ROAD, PITTSBURGH, PA 15237
County: ALLEGHENY **Region:** WESTERN

Administrator

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

Legal Entity

Name: VINCENTIAN HOME INC
Address: 111 PERRYMONT ROAD, ATTN MICHELE DOLBY, PITTSBURGH, PA, 15237
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 04/11/1997 **Issued By:** Labor and Industry

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 60 **Waking Staff:** 45

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident **Exit Conference Date:** 11/22/2023

Inspection Dates and Department Representative

10/30/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 60 **Residents Served:** 48

Secured Dementia Care Unit

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

Hospice

Current Residents: 4

Number of Residents Who:

Receive Supplemental Security Income: 3 **Are 60 Years of Age or Older:** 48
Diagnosed with Mental Illness: 1 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 12 **Have Physical Disability:** 0

Inspections / Reviews

10/30/2023 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 12/09/2023

12/08/2023 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 12/18/2023
Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 12/14/2023

Inspections / Reviews *(continued)*

12/11/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/18/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 12/26/2023

12/18/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/18/2023

Reviewer: [REDACTED]

Follow Up Type: Not Required

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

At the beginning of [REDACTED], staff person A took resident #1's debit card from the resident's bedroom. Staff person A then used resident #1's debit card, without resident #1's knowledge or consent, and was seen on video surveillance between [REDACTED] through [REDACTED], charging approximately [REDACTED] on resident #1's debit card at numerous businesses, to include [REDACTED].

Plan of Correction

Accept [REDACTED] - 12/11/2023)

Staff person A's employment was terminated on [REDACTED]. A letter was sent/given to residents & family members dated [REDACTED] to remind them of available options for safekeeping of valuables to include a lockbox, a locking drawer in a dresser and/or a resident fund account. A copy of this letter is attached. An audit was conducted by administrator of each resident room to determine if a locking device was present/in use/desired. A lockbox and/or key was provided if the resident did not currently have but wished to. The audit was completed on 12/6/2023 and is attached to this submission. A staff meeting is scheduled for 12/12/23 to include education on types of abuse and reporting. A record of the training will be maintained. Administrator or designee will meet with 5 residents/month privately to assess for any concerns of abuse and ensure ability to secure valuables if any are present. Interviews will be conducted beginning 12/11/23 and continuing for a period of 6 months. Audit form to be utilized is attached, audit records will be maintained.

Licensee's Proposed Overall Completion Date: 05/11/2024

Implemented [REDACTED] - 12/18/2023)