

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

May 22, 2024

[REDACTED]
REFORMED PRESBYTERIAN WOMEN'S ASSOCIATION
[REDACTED]

RE: REFORMED PRESBYTERIAN HOME
2344 PERRYVILLE AVENUE
PITTSBURGH, PA, 15214
LICENSE/COC#: 42966

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/27/2024 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: *REFORMED PRESBYTERIAN HOME* License #: *42966* License Expiration: *10/23/2024*
 Address: *2344 PERRYSVILLE AVENUE, PITTSBURGH, PA 15214*
 County: *ALLEGHENY* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *REFORMED PRESBYTERIAN WOMEN'S ASSOCIATION*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *10/10/1983* Issued By: *City of Pittsburgh*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *33* Waking Staff: *25*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: *05/02/2024*

Inspection Dates and Department Representative

03/27/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *56* Residents Served: *28*

Secured Dementia Care Unit

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

Hospice

Current Residents: *2*

Number of Residents Who:

Receive Supplemental Security Income: *1* Are 60 Years of Age or Older: *28*
 Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *1*
 Have Mobility Need: *5* Have Physical Disability: *1*

Inspections / Reviews

03/27/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/15/2024*

05/15/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: *05/22/2024*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/21/2024*

Inspections / Reviews (*continued*)

05/15/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/22/2024

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 05/27/2024

05/22/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/22/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

15a - Resident Abuse Report

1. Requirements

2600.

15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

On the morning of [REDACTED], staff person B witnessed verbal and physical abuse by staff person A towards resident [REDACTED] in the home's dining room; however, this abuse was not reported to the local Area Agency on Aging until 3/27/24.

Plan of Correction

Directed [REDACTED] - 05/15/2024)

Personal Care Home Administrator to re-educate all PCH staff the week of 5/13/24 on abuse/ neglect reporting including PC management, particularly focused on reporting to outside agencies in a timely manner, immediately upon suspicion. (DIRECTED: All staff persons shall receive the education by 5/20/24. Documentation of the staff education shall be kept in accordance with 2600.65i. [REDACTED] 5/15/24) lease see attached for education and sign-in sheet.

Ongoing review of incident reports and resident grievance forms to monitor for abuse/ neglect and that reportable incidents are reported timely.

DIRECTED: Beginning on 5/20/24: The administrator/designee shall review all internal incidents daily to ensure all allegations of abuse are immediately reported to the local Area Agency on Aging in accordance with the Older Adult Protective Services Act. LM 5/15/24.

IDT will review incidents at quarterly QAPI meetings, next meeting is July 16, 2024.

Proposed Overall Completion Date: 05/29/2024

Directed Completion Date: 05/20/2024

Implemented [REDACTED] - 05/22/2024)

42b - Abuse

2. 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

On the morning of [REDACTED], staff person A was assisting resident [REDACTED] in the dining room. Resident [REDACTED] began to get up out of her chair to leave the dining room when staff person B witnessed staff person A forcefully push resident [REDACTED] back into the dining room chair, stating to resident [REDACTED], [REDACTED]. According to staff person B, this incident made resident [REDACTED] feel uncomfortable.

REPEAT VIOLATION: 11/7/2023

42b - Abuse (continued)

Plan of Correction**Directed [REDACTED] - 05/15/2024)**

Staff person 1 was sent home immediately from duty when allegation was reported, they were terminated effective [REDACTED] after investigation was concluded.

All current PCH staff educated about Abuse/ Neglect identification and reporting by Personal Care Home Administrator during the week of 5/13/24. Please see attached for education and sign-in sheet. (DIRECTED: All staff persons shall receive the education by 5/20/24. Documentation of the staff education shall be kept in accordance with 2600.65i. [REDACTED] 5/15/24). Newly hired staff will continue to be educated on Abuse/ Neglect identification and reporting.

Ongoing review of incident reports and resident grievance forms to monitor for abuse/ neglect and that reportable incidents are reported timely.

DIRECTED: Beginning on 5/20/24: The administrator/designee shall interview at least 4 residents per week, in private, to ensure resident rights are protected and that residents are free from abuse. Documentation of the resident interviews shall be kept for 2 months. [REDACTED] 5/15/24.

IDT will review incidents at quarterly QAPI meetings, next meeting is July 16, 2024.

Proposed Overall Completion Date: 05/29/2024

Directed Completion Date: 05/27/2024

Implemented [REDACTED] 05/22/2024)