

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

November 7, 2024

[REDACTED]  
CONCORDIA LUTHERAN MINISTRIES OF PITTSBURGH  
[REDACTED]

RE: CONCORDIA AT THE CEDARS  
4363 NORTHERN PIKE  
MONROEVILLE, PA, 15146  
LICENSE/COC#: 44624

[REDACTED],  
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/12/2024 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: *CONCORDIA AT THE CEDARS* License #: *44624* License Expiration: *05/15/2025*  
 Address: *4363 NORTHERN PIKE, MONROEVILLE, PA 15146*  
 County: *ALLEGHENY* Region: *WESTERN*

**Administrator**

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

**Legal Entity**

Name: *CONCORDIA LUTHERAN MINISTRIES OF PITTSBURGH*  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C 1* Date: *08/19/1998* Issued By: *Dept of Health*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *84* Waking Staff: *63*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #: [REDACTED]  
 Reason: *Complaint, Incident* Exit Conference Date: *08/12/2024*

**Inspection Dates and Department Representative**

*09/12/2024 On Site* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *87* Residents Served: *69*

**Secured Dementia Care Unit**  
 In Home: *No* Area: [REDACTED] Capacity: [REDACTED] Residents Served: [REDACTED]

**Hospice**  
 Current Residents: *12*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *69*  
 Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *15* Have Physical Disability: *1*

**Inspections / Reviews**

**09/12/2024 - Partial**  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/19/2024*

**10/23/2024 - POC Submission**  
 Submitted By: [REDACTED] Date Submitted: *11/06/2024*  
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/29/2024*

Inspections / Reviews *(continued)*

10/30/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/06/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 11/06/2024

11/07/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/06/2024

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 [REDACTED], at approximately 8:45 a.m., staff person A was assisting resident [REDACTED] to transfer out of bed to a wheelchair. Staff person A had earbuds in and was actively in an argument and using profanity in a phone conversation. The resident began to cry and indicated it felt like [REDACTED] was falling forward and said it "scared the [REDACTED] out of me." Staff person A swung the resident around into the wheelchair and never acknowledged the resident.

**Plan of Correction****Accept [REDACTED] 10/30/2024)**

1. Staff member A was immediately suspended and escorted out of the facility after the report identified. Internal investigation was completed, and staff member A was terminated.
2. Current patients have the potential to be affected. Administrator will conduct 10 interviews with residents to determine if they feel that they are being treated with dignity and respect and determine if other residents are affected by 10/23/2024. Corrective action will be taken for any identified issues. Documentation of these interviews will be kept by the administrator.
3. The administrator and/or designee to educate all staff on regulation 42.c. by 10/23/2024. Staff member A has been terminated. Documentation of education to all staff to be kept by administrator.
4. The administrator and/or designee will conduct 3 resident interviews per week beginning 10/28/2024, for one month. After that month, the administrator will conduct 3 resident interviews per month to ensure the residents are being treated with dignity and respect. Documentation of the interviews will be kept by the administrator. Also, the administrator will ensure increased supervision of direct care staff while performing regular duties and will provide continual reinforcement of residents' rights and appropriate treatment of residents. The administrator and/or designee will perform rounds throughout the building 2 times per day for one month. After that the administrator will conduct rounds once per day for the next 2 months to ensure that residents are being treated with dignity and respect. Documentation of the audits will be kept by the administrator. Results of the audits will be shared at the Quality Assessment and Assurance Committee meeting on 11/21/2024 and then again at the next Quality Assessment and Assurance Committee meeting on 12/19/2024. Documentation of meetings will be kept by the administrator.

Licensee's Proposed Overall Completion Date: 01/31/2025

**Implemented [REDACTED] - 11/07/2024)**