

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

December 12, 2024

[REDACTED]
CRANBERRY PLACE
[REDACTED]

ATTN: MARK BONDI, PRESIDENT
[REDACTED]

RE: CUMBERLAND CROSSING MANOR
1201 CUMBERLAND ROAD
PITTSBURGH, PA, 15237
LICENSE/COC#: 44616

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/15/2024 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: CUMBERLAND CROSSING MANOR License #: 44616 License Expiration: 06/30/2025
 Address: 1201 CUMBERLAND ROAD, PITTSBURGH, PA 15237
 County: ALLEGHENY Region: WESTERN

Administrator

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

Legal Entity

Name: CRANBERRY PLACE
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: Total Daily Staff: 117 Waking Staff: 88

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Incident Exit Conference Date: 11/15/2024

Inspection Dates and Department Representative

11/15/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 115 Residents Served: 82

Special Care Unit
 In Home: No Area: Capacity: Residents Served:

Hospice
 Current Residents: 7

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 82
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 35 Have Physical Disability: 0

Inspections / Reviews

11/15/2024 Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 12/01/2024

12/02/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: 12/11/2024
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 12/06/2024

Inspections / Reviews *(continued)*

12/06/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/11/2024

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 12/12/2024

12/12/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/11/2024

Reviewer: [REDACTED]

Follow Up Type: Not Required

15a Resident abuse report

1. Requirements

2800.

15.a. The residence 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 [REDACTED] at approximately 9:00am, staff person A reported an allegation of physical abuse to staff person C, the residence's administrator, involving staff person B against resident [REDACTED] however, this allegation of abuse was not reported to the local Area Agency on Aging until [REDACTED] at approximately 5:00pm.

Plan of Correction

Accept [REDACTED] - 12/06/2024)

2800.15.a. The residence 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.

- 1) Nursing Assistant witnessed an interaction that she believed to be abusive between the Resident Support Coordinator (RSC) and a resident on 11/1/2024. The Nursing Assistant reported this detail to the Administrator verbally on 11/1/2024 and in writing on 11/4/2024. Following her written claim, the incident was reported to the APS and DHS on 11/4/2024.
- 2) On 11/27/2024 a one-month retrospective review was done by the Regional leadership team to ensure no other verbal reports of suspected abuse were not filed immediately. No other late reports were identified.
- 3) Regional Director has reviewed Regulation 2800.15.a. with Administrator on 11/27/2024. The regulatory requirement to immediately report allegations of suspected abuse, which includes verbal reports, in accordance with the Older Adult Protective Services Act. Certificate of Completion by Administrator completed 2- 30 minute learnings on 12/02/24, Incident-Reporting and Preventing, Recognizing, and Reporting Abuse. Administrator reviewed with designee, Suspected Resident Abuse Reporting and Investigation flow chart from RCG 12/03/24. Designee will assign learning to Direct Care Staff, Incident Reporting 12/04/24. Documentation of completion of training will be kept in accordance with 2800.65.(l).
- 4) The administrator or designee will audit incidents daily for 3 months to ensure allegations of abuse, which includes verbal reports, are immediately being reported in accordance with the Older Adult Protective Services Act. Audits began 11/27/24.
- 5) Audit findings will be reviewed by the Administrator and Regional Director within 3 business days of the receipt of an approved plan of correction and will continue for 3 months from initiation or until substantial compliance is achieved.

15a Resident abuse report (continued)

Proposed Overall Completion Date: 12/20/2024

Licensee's Proposed Overall Completion Date: 12/20/2024

Implemented [REDACTED] 12/12/2024)

15b Resident abuse-superv plan

2. Requirements

2800.

15.b. If there is an allegation of abuse of a resident involving a residence's staff person, the residence shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

Description of Violation

On [REDACTED] at approximately 9:00am, staff person A reported an allegation of physical abuse to staff person C, the residence's administrator, involving staff person B against resident [REDACTED]; however, staff person B continued to work unsupervised in the home on [REDACTED] until approximately 3:30pm and on [REDACTED] from approximately 7:30am to 3:30pm.

Plan of Correction

Accept [REDACTED] - 12/06/2024)

2800. 15.b. If there is an allegation of abuse of a resident involving a residence's staff person, the residence shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

1 Nursing Assistant witnessed an interaction that she believed to be abusive between the Resident Support Coordinator (RSC) and a resident on 11/1/2024. The Nursing Assistant reported this detail to the Administrator verbally on 11/1/2024 and in writing on 11/4/2024. Following her written claim, the incident and a plan of supervision for the RSC was reported to the APS and DHS on 11/4/2024.

2 On 11/27/2024 a one-month retrospective review was done by the Regional leadership team to ensure that there were no other verbal and/or written reports of abuse that would require a plan of supervision or suspension. No other like incidents were identified.

3 Regional Director has reviewed Regulation 2800.15.b., that if there is an allegation of abuse that leadership must immediately develop, submit, and implement a plan of supervision or suspend the staff person involved as indicated with Administrator on 11/27/2024. Administrator reviewed regulation with designee 12/03/24, designee to assign learning module to licensed nursing staff designated to report incident to BHSL 12/04/24. Documentation of completion of training will be kept in accordance with 2800.65.(l).

4 The administrator or designee will audit incidents daily for 3 months to ensure that in any allegations of abuse, leadership has also immediately developed, submitted and implemented a plan of supervision or has suspended the staff person involved as indicated. Audits began 11/27/2024.

5 Audit findings will be reviewed by the Administrator and Regional Director within 3 business days of the receipt of an approved plan of correction and will continue for 3 months from initiation or until compliance is achieved.

Licensee's Proposed Overall Completion Date: 12/20/2024

15b Resident abuse superv plan (*continued*)*Implemented* [REDACTED] - 12/12/2024)

16c Incident reporting

3. Requirements

2800.

16.c. The residence shall report the incident or condition to the Department's assisted living residence office or the assisted living residence complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2800.15 (relating to abuse reporting covered by law).

Description of Violation

On [REDACTED] at approximately 9:00am, staff person A reported an allegation of physical abuse to staff person C, the residence's administrator, involving staff person B against resident [REDACTED]; however, this allegation of abuse was not reported to the Department until 11/5/24.

REPEAT VIOLATION: 3/26/2024

Plan of Correction*Directed* [REDACTED] - 12/06/2024)

- 2800.16.c. The residence shall report the incident or condition to the Department's assisted living residence office or the assisted living residence complaint hotline within 24 hours in a manner designated by the Department.
- 1 Nursing Assistant witnessed an interaction that she believed to abusive between the Resident Support Coordinator (RSC) and a resident on 11/1/2024. The Nursing Assistant reported this detail to the Administrator verbally on 11/1/2024 and in writing on 11/4/2024. Following her written claim, the incident was reported to the APS and DHS on 11/4/2024.
 - 2 On 11/27/2024 a one-month retrospective review was done by the Regional leadership team to ensure no other verbal and/or written reports of abuse were filed beyond 24-hour of the facility becoming aware of the allegation. No other late reports were identified.
 - 3 Regional Director has reviewed Regulation 2800.16.c. with Administrator on 11/27/2024. If there is an allegation of abuse either verbal and/or written that a report must be submitted to the Department within the 24-hour timeline expectation. Administrator reviewed regulation with designee 12/03/24, designee to assign learning module to licensed nursing staff designated to report incident to BHSL 12/04/24. Documentation of completion of training will be kept in accordance with 2800.65.(l).
 - 4 The administrator or designee will audit incidents daily for 3 months to ensure allegations of abuse, which includes verbal reports, are immediately being reported in accordance with the Older Adult Protective Services Act specific to 2800.16.c. Audits began 11/27/24. (DIRECTED: The daily audits shall include a review of all internal incidents to ensure all incidents specified in 2800.16a are reported to the Department within 24 hours in accordance with 2800.16c. LM 12/6/24)
 - 5 Audit findings will be reviewed by the Administrator and Regional Director within 3 business days of the receipt of an approved plan of correction and will continue for 3 months from initiation or until compliance is achieved.

16c Incident reporting (continued)

Proposed Overall Completion Date: 12/20/2024

Directed Completion Date: 12/12/2024

Implemented [REDACTED] - 12/12/2024)