

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

June 4, 2025

[REDACTED]
CONCORIDA OF MONROEVILLE
[REDACTED]

RE: CONCORDIA AT WEATHERWOOD
896 WEATHERWOOD LANE
GREENSBURG, PA, 15601
LICENSE/COC#: 45616

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/23/2025 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 WEATHERWOOD* License #: *45616* License Expiration: *08/13/2025*
 Address: *896 WEATHERWOOD LANE, GREENSBURG, PA 15601*
 County: *WESTMORELAND* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *CONCORIDA OF MONROEVILLE*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *1 1* Date: *03/26/2013* Issued By: *Hempfield TWP*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *76* Waking Staff: *57*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint* Exit Conference Date: *04/23/2025*

Inspection Dates and Department Representative

04/23/2025 On Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *106* Residents Served: *66*

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

Hospice
 Current Residents: *5*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *66*
 Diagnosed with Mental Illness: *10* Diagnosed with Intellectual Disability: *1*
 Have Mobility Need: *10* Have Physical Disability: *1*

Inspections / Reviews

04/23/2025 - Partial
 Lead Inspector: [REDACTED] Follow Up Type: *POC Submission* Follow Up Date: *05/16/2025*

Inspections / Reviews (*continued*)

05/09/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/01/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 06/01/2025

06/04/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/01/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

15b - Supervisor Plan

1. Requirements

2600.

15.b. If there is an allegation of abuse of a resident involving a home's staff person, the home 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 1:30 p.m., resident [redacted] made an accusation of resident abuse / neglect against staff member A. Staff member A continued providing services / having contact with the resident population in general and resident [redacted] specifically on multiple dates to include, [redacted] through [redacted] and [redacted] through [redacted]. However, the home did not have a plan of supervision approved by the department for staff member A.

On [redacted] at approximately 1:30 p.m., resident [redacted] made an accusation of resident abuse / Neglect against staff member B. Staff member B continued providing services / having contact with the resident population in general and resident [redacted] specifically on multiple dates to include [redacted] 2-1030 pm, [redacted], 2-1030 p.m., [redacted], 5-1030 p.m., [redacted] 2-1030 p.m., and [redacted], 2-1030 p.m. However, the home did not have a plan of supervision approved by the department for the staff member B.

Plan of Correction

Accept [redacted] - 05/09/2025)

On 3/27/2025 PCHA provided mandatory staff training on the PC regulation 2600.15. b, Supervisor Plan. Any employee that has an allegation of abuse will immediately be placed on a plan of supervision or suspended by PCHA or designee. Staff trainings will continue for 3 months, randomly, and annually. All allegations of abuse will be reported to PCHA/designee, BSHL, and AAA immediately. PCHA or designee will track all allegations of abuse and supervision plans created weekly for 3 weeks and then monthly for 3 months. All supervision plans will be submitted to BHSL with initial reportable. Employee will remain on supervision plan until BHSL/AAA representative completes investigation.

Licensee's Proposed Overall Completion Date: 06/01/2025

Implemented ([redacted] - 06/04/2025)

183b - Meds and Syringes Locked

2. Requirements

2600.

183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

Description of Violation

Resident [redacted] most recent assessment and support plan completed 6/20/24, indicated resident [redacted] cannot self-administer any medications. However, there was a partially used container of [redacted] on the right bedside dresser located in resident [redacted] resident room.

Resident [redacted] most recent assessment and support plan completed 6/20/24, indicated the resident cannot self-administer any medications. However, there was a partially used tube of [redacted] on the countertop of the kitchenette located in resident [redacted] resident room.

Resident [redacted] most recent assessment and support plan completed 6/20/24, indicated the resident cannot

183b Meds and Syringes Locked (continued)

self administer any medications. However, there was a partially used tube of [redacted] use small amount on affected area two to three times daily on the sink in the bathroom located in resident [redacted] resident room.

Plan of Correction

Accept [redacted] 05/09/2025)

On 3/27/2025 PCHA provided mandatory staff training on the PC regulation 2600.183.b Meds and Syringes Locked. All prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medication and syringes kept in residents room.

PCHA reviewed resident's support plan and updated it to reflect resident's ability to self administer medication. Resident's DME was also reviewed by MD to reflect resident's ability to self administer medications. Resident's medications were placed in locked container in room.

PCHA or designee will complete room audits weekly for 3 weeks, monthly for 3 months, randomly afterwards, and then annually. PCHA or designee will maintain record of audits.

Licensee's Proposed Overall Completion Date: 06/01/2025

Implemented [redacted] - 06/04/2025)

183d - Prescription Current

3. Requirements

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

At approximately 10:50 a.m., there was a partially used container of [redacted] on the right side dresser located in resident [redacted] room. However, resident [redacted] did not have a physician's order for this medication.

At approximately 10:50 a.m., there was a partially used tube of [redacted] pain cream on the countertop of the kitchenette located in resident [redacted] room. However, resident [redacted] did not have a physician's order for this medication.

At approximately 10:50 a.m., there was a partially used tube of [redacted] use small amount on affected area two to three times daily, on the sink in the private bathroom located in resident [redacted]s room. However, resident [redacted] did not have a physician's order for this medication.

Plan of Correction

Accept ([redacted] - 05/09/2025)

On 3/27/2025 PCHA provided mandatory staff training on the PC regulation 2600.183.d Prescription Current. Only Current prescription, OTC Sample, and CAM for individual living in the home may be kept in the home. PCHA or designee to complete audit for 3 weeks, monthly for 3 months, randomly afterwards and then annually to ensure that all medications in facility have a physician's order. If medication is present in facility without an order, staff will dispose of medication or obtain new order for medication.

Licensee's Proposed Overall Completion Date: 06/01/2025

Implemented [redacted] - 06/04/2025)

227e - Self Administer Medication

4. Requirements

2600.

227.e. The resident's support plan must document the ability of the resident to self-administer medications or the need for medication reminders or medication administration.

Description of Violation

Resident [redacted] most recent assessment and support plan completed 6/20/24, indicated the resident cannot self-administer any medications. However, the resident was ordered [redacted] applied two grams topically to bilateral knees three times a day is needed for pain, may keep it bedside.

Plan of Correction

Accept [redacted] - 05/09/2025)

On 3/27/2025 PCHA provided mandatory staff training on the PC regulation 2600.227.e Self Administer Medication. Resident's support plan must document the ability of the resident to self administer medications or the need for medication reminders or medications administration.

PCHA reviewed resident's support plan and updated it to reflect resident's ability to self administer medication.

Resident's DME was also reviewed by MD to reflect resident's ability to self administer medications.

PCHA or designee will complete room/ assessment plan audits weekly for 3 weeks, monthly for 3 months, randomly afterwards, and then annually. PCHA or designee will maintain record of audits.

Licensee's Proposed Overall Completion Date: 06/01/2025

Implemented [redacted] - 06/04/2025)