

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

February 6, 2026

[REDACTED]
CONCORIDA OF MONROEVILLE
[REDACTED]
[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 11/25/2025 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:** 08/13/2026

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

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 89 **Waking Staff:** 67

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**

Reason: Interim **Exit Conference Date:** 11/25/2025

Inspection Dates and Department Representative

11/25/2025 **On Site:** [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 106 **Residents Served:** 76

Secured Dementia Care Unit

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

Hospice

Current Residents: 12

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 76

Diagnosed with Mental Illness: 57 **Diagnosed with Intellectual Disability:** 1

Have Mobility Need: 13 **Have Physical Disability:** 1

Inspections / Reviews

11/25/2025 - Partial

Lead Inspector: [REDACTED] **Follow Up Type:** POC Submission **Follow Up Date:** 12/27/2025

Inspections / Reviews *(continued)*

01/08/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/30/2026

Reviewer: [REDACTED]

Follow Up Type: POC Submission

Follow Up Date: 01/15/2026

01/16/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/30/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 01/29/2026

02/06/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/30/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

25b - Contract Signatures

1. Requirements

2600.

25.b. The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

Description of Violation

The resident-home contract, dated [redacted] for resident [redacted] was not signed by the resident or responsible party.

Plan of Correction

Accept [redacted] - 01/08/2026)

On 11/25/25 PCHA notified resident and resident responsible party that they needed to sign admission contract.

Admission contract signed by both parties on 11/25/25.

On 11/26/25 PCHA and Resident Care Coordinators educated nursing staff/admission staff on PCH regulation 2600.25.b.

PCHA and or Admission Coordinator to ensure that all new admit contracts are signed within 24 hour of admission starting on 11/26/25 and will complete weekly random audit of all resident admission contracts until 1/6/2026 and then randomly afterwards, as well as annually.

Licensee's Proposed Overall Completion Date: 01/06/2026

Implemented [redacted] - 02/06/2026)

25c4 - Payment Responsibility

2. Requirements

2600.

25.c. At a minimum, the contract must specify the following:

- 4. The party responsible for payment.

Description of Violation

The resident-home contract, dated [redacted] for resident [redacted] does not specify the party responsible for payment.

Plan of Correction

Accept [redacted] - 01/08/2026)

On 11/25/25 PCHA notified resident and resident responsible party that they needed to sign admission contract.

Admission contract signed by both parties on 11/25/25.

On 11/26/25 PCHA and Resident Care Coordinators educated nursing staff/admission staff on PCH regulation 2600.25.c4.

PCHA and or Admission Coordinator to ensure that all new admit contracts are signed within 24 hour of admission starting on 11/26/25 and will complete weekly random audit of all resident admission contracts until 1/6/2026 and then randomly afterwards, as well as annually.

Licensee's Proposed Overall Completion Date: 01/06/2026

Implemented [redacted] - 02/06/2026)

103g - Storing Food

3. Requirements

2600.

103.g. Food shall be stored in closed or sealed containers.

Description of Violation

At approximately 10:35 a.m., an opened and unsealed zip lock bag of hard-boiled eggs was on the shelf in the refrigerator of the main kitchen.

103g Storing Food (continued)

Plan of Correction

Accept [redacted] - 01/16/2026)

On 11/25/2025 Dietary aide immediately discarded opened and unsealed hard boiled eggs in Ziplock container. On 11/26/25 PCHA and Resident Crae Coordinators educated kitchen staff on PCH Regulation 2600.103.g. PCHA to complete random weekly kitchen audit to ensure that all food items are stored in a closed/ sealed container and dated until 1/29/2026. Audits will continue 2 3 times monthly as well as annually to ensure that regulation is met.

Licensee's Proposed Overall Completion Date: 01/29/2026

Implemented [redacted] - 02/06/2026)

183b - Meds and Syringes Locked

4. 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

On [redacted] at 10:19 a.m., the following medications were unlocked, unattended and accessible in the bathroom of resident [redacted] bedroom: [redacted] and [redacted].

Plan of Correction

Accept [redacted] - 01/16/2026)

On 11/25/25 Resident Care Coordinator removed medications from resident [redacted]'s bedroom and placed them in the medication cart located on the floor. On 11/26/25 PCHA and Resident Care Coordinators educated staff on 2600.183.b. PCHA and /or designee to complete weekly room rounds on each floor to ensure all medications are in locked area or in the med carts until 01/29/26. Audits will continue 2 3 times monthly as well as annually to ensure that regulation is met.

Licensee's Proposed Overall Completion Date: 01/29/2026

Implemented [redacted] - 02/06/2026)

185a - Implement Storage Procedures

5. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident [redacted] is prescribed [redacted] before meals per sliding scale:

[redacted] call MD for [redacted] over [redacted]

On [redacted] at 11:00 a.m., resident [redacted] was administered [redacted]; however, the resident's Medication Administration Record does not indicate the resident's [redacted].

185a - Implement Storage Procedures (continued)

Plan of Correction

Accept [redacted] - 01/08/2026)

On 11/26/25 PCHA and Resident Care Coordinator provided staff training regarding PCH Regulation 2600.185.a PCHA and/or designees to check three number, dates, and times in each resident's glucometer against the MAR and address any discrepancies between the MAR. If glucometer has a PRN reading, staff will write progress note detailing the events form the PRN reading 01/06/2026, then weekly, at random, and annually. Staff will also ensure that each resident with a glucometer has their own bag with their room number and name on it.

Licensee's Proposed Overall Completion Date: 01/06/2026

Implemented [redacted] - 02/06/2026)

187d - Follow Prescriber's Orders

6. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident [redacted] is prescribed [redacted], inject subcutaneously before meals per sliding scale:

[redacted]

call MD for [redacted] over [redacted]

On [redacted] at 11:00 a.m., resident # [redacted] reading was [redacted]; however, no medication was administered.

Plan of Correction

Accept [redacted] - 01/16/2026)

On 11/25/25 PCHA immediately notified residents PCP of medication error that occurred on 11/19/2025. On 11/26/25 PCHA and Resident Care Coordinator provided staff training regarding PCH Regulation 2600.187d. d. PCHA and/or designees to check three readings, dates, and times in each resident's glucometer against the MAR and address any discrepancies between the MAR to ensure that the correct medication was administered based off of the resident's orders. If glucometer has a PRN reading, staff will write progress note detailing the events that lead to the PRN reading and any new orders received from resident's medical provider. If a medication error does occur staff will notify PCHA and or designees immediately as well as PCP. PCHA and or designees to observe 3 medication administration daily for at least 4 days a week beginning on 01/11/2026 and ending on 01/29/2029. Audits will continue 2-3 times monthly, at random, and annually to ensure regulation has been met.

Licensee's Proposed Overall Completion Date: 01/29/2026

Implemented [redacted] - 02/06/2026)