



April 18, 2014

Judith Gawlas, Director  
Elizabeth Seton Center, Inc.  
1900 Pioneer Avenue  
Pittsburgh, PA 15226

RE: Elizabeth Seton Center, Inc.  
License # 060300 - Regular

Dear Ms. Gawlas:

As a result of the Department of Aging's licensing inspection of the above named facility on 03/06/2014, two areas of non-compliance were identified. The legal entity submitted an acceptable written plan to correct each area of non-compliance. Therefore, the Department issued a Regular License, indicating compliance with applicable statutes, ordinances and regulations.

Thank you for your continued effort to provide quality older adult daily living services. If you have questions, please contact me at (717) 214-6716.

Sincerely,

A handwritten signature in black ink, appearing to read "Kevin Longenecker", is written over a light blue horizontal line.

Kevin Longenecker  
Director

Enclosures

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF AGING

# LICENSE

This license is hereby granted to ELIZABETH SETON CENTER, INC.  
LEGAL ENTITY

To operate ELIZABETH SETON CENTER, INC.  
(NAME OF CENTER)

Located at 1900 PIONEER AVENUE PITTSBURGH, PA 15226  
(COMPLETE ADDRESS OF CENTER)

To provide older adult daily living services.

The total number of persons which may be served at one time may not exceed 33  
(MAXIMUM CAPACITY)

Restrictions: \_\_\_\_\_

This license is granted in accordance with the Act of July 11, 1990 (P.L. 499, No. 118) and Regulations.

TITLE 6. PA CODE. CHAP. 11. OLDER ADULT DAILY LIVING CENTER Dated July 03, 1993  
(NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from May 01, 2014 until April 30, 2015

unless sooner revoked for non-compliance with applicable laws and regulations.

No: 060300 - Regular



ISSUING OFFICER

NOTE: This license is issued for the above address only and is not transferable. This license should be posted in a conspicuous place in the center.

Issued On: April 18, 2014

AGL01

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER LICENSE NUMBER:  <b>060300</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>03/06/2014</b>
NAME OF PROVIDER OR SUPPLIER  <b>Elizabeth Seton Center, Inc.</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>1900 PIONEER AVENUE PITTSBURGH, PA 15226</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
1 000	<b>Initial Comments</b>  A State licensure visit was completed on 03/06/2014 and it was determined that Elizabeth Seton Center, Inc. was not in compliance with the following requirements of 6 PA Code, Chapter 11, Older Adult Daily Living Centers regulations:	1 000		
11290	<b>11.83 Fire safety inspection</b>  The center shall have an annual on-site fire safety inspection by the local fire department or other fire safety authority. Documentation of the date, source and results of the fire safety inspection shall be kept with its records.  This STANDARD is not met as evidenced by:  <b>Findings:</b> Based on a review of center records, it was found that the center did not have an annual on-site fire safety inspection within 12 months from the date of the previous inspection. The most recent on-site fire safety inspection was conducted on 10/08/13. The previous fire safety inspection was conducted on 09/07/12.	11290	<b>Plan of Correction is required</b>  <i>Plan to correct 11.83 Seton Center Adult Day Services will comply and continue to comply to the required 6 PA code chapter 11. The standard will be followed by the following policy. All fire inspections will be scheduled by the CEO's administrative secretary of the facility. The fire department will be notified 3 months in advance to assure that the inspection is within a year to the month.</i>	<i>3/7/14</i>

AUTHORIZED PROVIDER REPRESENTATIVE'S SIGNATURE

*Roberta Terlecki R.N.*

TITLE

*Director*

(X6) DATE

*3/10/14*

DEPARTMENT OF AGING APPROVAL

*[Signature]*

DATE

*Chief, Division of Licensing 4/11/14*

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11873	<p><b>11.123(2) Core Services - Nursing Services</b></p> <p>The following essential, core services shall be offered or arranged in center programs: personal care, nursing, social services, therapeutic activities, nutrition and emergency care. The intensity of the services shall be modified to meet the functional needs of the clients. It is anticipated that the services will be on a continuum to meet the range of client needs, with appropriate staff persons to supply or arrange these services. Each essential core service shall be addressed during the care planning process. The center shall provide and maintain the essential space, materials and equipment necessary to provide these services and to protect the privacy of the clients receiving the services. Core services are as follows:</p> <p>(2) Nursing services. The center shall provide, contract for or otherwise arrange for nursing services. The number of services provided by the nurse, the manner in which a center obtains nursing services (which may range from formal to informal), and the amount of time spent by the nurse in a center (which may, for example, range from the daily services of a registered nurse staff person to a monthly or quarterly visit by a practical nurse) depend upon the needs of the center's clients. Nursing service includes the following:</p> <p>(i) Centers shall carry out the following standard nursing functions at least quarterly:</p> <p>(A) A review of the client's health status, including dietary needs.</p> <p>(B) Review of medication procedures, if necessary.</p> <p>(C) Review of policies and procedures for personal</p>	11873	<p>Plan to correct 11.123(2)</p> <p>The R.N. + L.P.N. will review and document all results on each client every 90 days. The Director will check for compliance, including the following:</p> <p>A. Review of clients' health status, including dietary needs.</p> <p>B. Review of medications, if necessary.</p> <p>Form attached.</p>	3/7/14

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11873	<p>Continued From page 2 care.</p> <p>(D) Training and education of staff persons regarding the needs of clients in centers, including infection control.</p> <p>(ii) The following nursing functions may be added to subparagraph (i) if they are consistent with the goals of the center and the characteristics of persons admitted to the center, as determined through intake screening and client physical examination and medical reports:</p> <p>(A) Provision or supervision of modified and therapeutic diets and supplemental feedings.</p> <p>(B) Provision or supervision of observation, monitoring and intervention for unstable medical episodes.</p> <p>(C) Preparation of the client for self-administration of medications.</p> <p>(D) Provision of restorative or rehabilitative nursing.</p> <p>(E) Provision of maintenance of respiratory aids, colostomy and ileostomy, urinary drainage devices, dressings, skin care, foot and nail care and routine care of incontinent clients.</p> <p>(F) Response to emergencies.</p> <p>(G) Administration of parenteral treatments.</p> <p>(H) Provision of other skilled nursing care, which can be safely done in the older adult daily living center.</p> <p>This STANDARD is not met as evidenced by:</p> <p><b>Based</b> on a review of client records and interview with center director, it was determined that the center's</p>	11873		

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11873	Continued From page 3 nurse had not reviewed client health status on a quarterly basis as required by regulation 11.123(2)(i), (A) and (B). The nursing narrative entries did make notes on changes in client health status and personal care needs monthly. However, the nurse did not document on all of the standard nursing functions required under this regulations. She did not include dietary and medication reviews.	11873		