STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	395034	A. Building B. Wing	05/29/2026

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
Vincentian Home	111 Perrymont Road Pittsburgh, PA 15237

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0585 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Honor the resident's right to voice grievances without discrimination or reprisal and the facility must establish a grievance policy and make prompt efforts to resolve grievances. Based on review of facility policy, facility documents and staff and resident interviews it was determined that the facility failed to provide complete documentation in response to a resident concern and failed to log concerns for one of three residents (Resident R53).Findings include: Review of the facility policy Grievance Policy dated 3/9/26, indicated the resident has the right to voice grievances in writing or orally to the facility or other agency or entity. Grievance Official/Nursing Home Administrator/Designee will be responsible for overseeing the grievance process, receiving and tracking grievances through to their conclusions. The Grievance Official/Designee will investigate and provide follow-up within 72 hours to resident/family member. The Pink Encounter Form is logged on the Encounter Form Log for tracking purposes. Review of Resident R53's Pink Encounter Form dated 5/14/26, indicated resident reported an incident that happened on 5/13/26, involving a comment made by Housekeeping Employee E8 to resident in front of the resident's visitor. Further review of R53's Pink Encounter Form on 5/27/26, the Section Below to Be Completed by Facility Staff portion was blank. Review of May 2026, facility provided Encounter Form Log on 5/27/26, failed to include Resident R53's grievance. Interview on 5/27/26, at 1:12 p.m. Chief Nursing Officer Employee E2 confirmed that the facility failed to provide complete documentation in response to a resident concern and failed to log concerns for one of three residents (Resident R53). 28 Pa. Code 201.14 (a) Responsibility of licensee.28 Pa. Code 201.18 (e)(1) Management.28 PA Code: 201.29 (a) Resident rights.

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE

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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0600 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Protect each resident from all types of abuse such as physical, mental, sexual abuse, physical punishment, and neglect by anybody. **NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on review of facility policy and documentation, staff and resident interviews it was determined that the facility failed to protect residents from abuse for one of three residents (Resident R53).Findings include: Review of the facility policy Freedom from Abuse, Neglect, and Exploitation last reviewed 3/9/26, indicated to maintain an environment where residents are free from abuse, neglect, exploitation and misappropriation of resident's property. Abuse is the willful infliction of injury, unreasonable confinement, intimidation, or punishment with resulting physical harm, pain or mental anguish. Review of the clinical record indicated Resident R53 was admitted to the facility on [DATE]. Review of Resident R53's Minimum Data Set (MDS - a periodic assessment of care needs) dated 5/14/26, indicated diagnoses of anemia (the blood doesn't have enough healthy red blood cells), renal insufficiency (a condition in which the kidneys lose the ability to remove waste and balance fluids), and high blood pressure. Section C0500 indicated a Brief Interview for Mental Status (BIMS is a screening test that aids in detecting cognitive impairment) score of 15, cognitively intact. Review of facility provided documents dated 5/13/26, indicated the facility received a grievance form this afternoon indicating an alleged abuse incident. Resident R53 was interviewed by Social Service Employee E18 stating the resident had gone to bathroom and made a mess. Resident said they tried to clean up what they could see. A friend came in to visit and while visitor was present, Housekeeping Employee E8 said to the resident You made a mess of this bathroom. If this happens again you need to let the nurse or someone know. Resident indicated they were embarrassed and pissed that housekeeper said this in from of resident's friend and not waited until resident was alone. Review of Resident R53's account of the incident dated 5/14/26, indicated the resident used the bathroom in the resident room independently. When the resident was done a housekeeper went into the bathroom. The resident thought the housekeeper was cleaning, then the housekeeper left the room. Later, the resident had a friend visiting. While the visitor was still present, the housekeeper came back into the room and yelled at resident for making a mess in the bathroom. Housekeeper continued to tell resident if they make a mess, they need to tell someone right away and not wait. Resident reported feeling berated and belittled. Resident was unaware that they had made a mess and that is why they did not tell anyone. On top of getting yelled at, the visitor who was an old work colleague now was aware the resident was incontinent. Review of Housekeeping Employee E8's signed witness statement dated 5/14/26, indicated the housekeeper was in Resident R53's bathroom in the afternoon and the bathroom was filled with bowel movement. The bowel movement was on the walls in the bathroom, on the floor and running down the side of the toilet. It was so messy the housekeeper cleaned it up right away. The resident had company and the housekeeper told the resident if the room is messy like this again to ring call bell and let staff know. Housekeeper denied yelling at resident and indicated they were just trying to clean the room. Interview on 5/27/26, at 1:00 p.m. Resident R53 indicated they had a friend visiting, one of the housekeepers came in and said you made a mess in there and you need to tell a nurse. If they had come one on one with me, it would have been fine. The housekeeper said it in front of my friend. Resident indicated they were a younger resident and were completely embarrassed and humiliated by the housekeeper's statements. Interview on 5/27/26, at 1:10 p.m. the Chief Nursing Officer Employee E2 confirmed the facility failed to protect residents from abuse for one of three residents (Resident R53). 28 Pa. Code 201.14(a) Responsibility of Licensee.28 Pa. Code 201.18(b)(1)(3) Management.28 Pa. Code 201.29(a)(c) Resident Rights28 Pa. Code 211.10(c)(d) Resident Care Policies.28 Pa. Code 211.12(d)(1)(3)(5) Nursing services.