



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
11 Stanwix Street
Room 230
Pittsburgh, Pennsylvania 15222

ADULT RESIDENTIAL LICENSING

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Mailing Date: JUN 10 2011

Ms. Susan Nagy, Program Director
Keystone Human Services
3609 Derry Street
Harrisburg, Pennsylvania 17101

RE: Keystone Community MH
1009 Old Noblestown Road
Oakdale, Pennsylvania 15071

Dear Ms. Nagy:

As a result of the Department of Public Welfare's licensing inspection on May 20, 2011 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

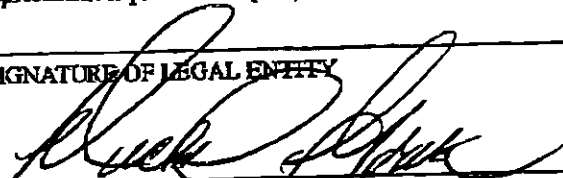
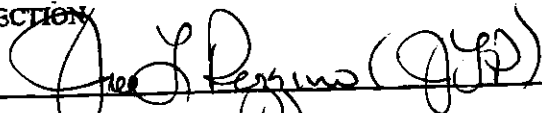
Sincerely,



A handwritten signature in cursive script, appearing to read "Jill Pezzino".

Jill Pezzino
Regional Licensing Administrator

Enclosure(s)

VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME KEYSTONE COMMUNITY MH, 1009 OLD NOBLESTOWN ROAD OAKDALE, PA 15071		CURRENT LICENSE NUMBER 438760	
INSPECTION DATES (Include all dates of the inspection) 05/20/2011		REGIONAL REPRESENTATIVE Tera Newman, Lisa Flimmer-Alman	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY 	DATE 6-9-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 6-10-11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED <small>Initials (DPW)</small>
15b 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.	On 5-13-11, an allegation of abuse was made against staff person A regarding resident #1. Staff person A was put on administrative leave. The home reinstated staff person A prior to the Department's findings from the investigation.	5-27-11	Staff will not be reinstated until both the Department and the home conclude the investigation in the future	<small>Steps have been taken to correct violation; full compliance is not verifiable</small> Date 
227c The support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment.	An assessment was completed for resident #1 on 3-11-11. The resident's support plan has not been revised. An assessment was completed for resident #2 on 3-2-11. The resident's support plan has not been revised.	6-1-11 6-1-11	The support plans have been revised All support plans will be revised within 30 days of completion or revision of assessments The administrator will	<small>Steps have been taken to correct violation; full compliance is not verifiable</small> Date 
	Western Region	7-20-11		

Review all resident's assessments and support plans to ensure they are current.
6-10-11
JJP

May 31, 2011 9:41AM

JUN-09-2011 THU 08:15 AM KCMHS

FAX NO. 7175589940

No. 3547 P. 2

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