



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

MAY 06 2014

Mr. Michael Grier, ED, Chief Executive Officer
Keystone Community Mental Health Services
8182 Adams Drive
Hummelstown, Pennsylvania 17036

RE: Market Street Specialized Community Residence
1926 East Market Street
York, Pennsylvania 17402
License #: 312380

Mr. Grier:

As a result of the Department of Public Welfare's licensing inspection on November 25, 2013, of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Your regular license for the period March 14, 2014 to March 14, 2015 was issued on December 4, 2013. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink, appearing to read "Matthew S. Jones", with a long horizontal flourish extending to the right.

Matthew S. Jones
Director

Enclosure
License Inspection Summary

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

PCH Name: MARKET STREET SPECIALIZED COMMUNITY RESIDENCE		License Number: 312380
Address: 1926 EAST MARKET STREET, YORK, PA 17402		County: York
Administrator: Deneen Morris		Region: CENTRAL
Legal Entity Name: KEYSTONE COMMUNITY MENTAL HEALTH SERVICES		
Legal Entity Address: 3609 DERRY STREET, HARRISBURG, PA 17111		
Certificate(s) of Occupancy R-3 05/05/2006 Springettsbury Typ		
Staffing Hours Resident Support: NM Total Daily Staff: 8 Waking Staff: 8		
Type of Inspection: Ind - Full BHA Docket Number: NA Notice: Unannounced		
Reason(s) for Inspection(s) Indicator		
On-Site Inspections Dates and Department Representatives On-Site 11/25/2013: Riel, Becky; Rosenblat, Dale		
Off-Site Inspection Dates and Inspectors, if Applicable		
<p>RECEIVED</p> <p>MAR 04 2014</p> <p>CENTRAL REGION FIELD OFFICE Human Services Licensing</p>		
Other Details Partial or Full Triggers: 89b; 103e; 132b Random Indicators: 44g; 19; 27a; 89b; 29(b5i)		
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 8 Number of Residents Served: 8 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 0 Number of Hospice Residents in past year: 0	Number of Residents who: Receive Supplemental Security Income: 8 Are 60 Years of Age or Older: 3 Have Mental Illness: 8 Have an Intellectual Disability: 0 Have a Mobility Need: 0 Have a Physical Disability: 0	

Violation Report: 31238 - 11/25/2013 - Riel, Becky
 PCH Name: MARKET STREET SPECIALIZED COMMUNITY RESIDENCE

1. REGULATION 55 Pa.Code §2600
 2600.28(e) - In the event of a death of a resident under 60 years of age, the administrator shall refund the remainder of previously paid charges to the resident's estate within 30 days from the date the room is cleared of the resident's personal property. In the event of a death of a resident 60 years of age and older, the home shall provide a refund in accordance with the Elder Care Payment Restitution Act (35 P.S. §§ 10226.101 - 10226.107). The home shall keep documentation of the refund in the resident's record.

2a. DESCRIPTION OF VIOLATION
 Resident #1, age 57, died on 7/13/2013. The resident's personal belongings still remain in the home; however, the bedroom had been cleared. The home did not refund the resident's previously paid rent to the resident's estate until 9/27/2013.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The resident's family has been contacted on multiple occasions but they will not pick-up the family members belongings. The program will obtain an address and ship the belongings to the family. The paperwork required to process residents refunds must be done in a more timely manner. The Program Director will ensure that this is done in the required time frame to ensure the refund can be processed correctly.

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Date 3-3-14

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>3/2/14</u> (Date)	Plan of correction implementation status as of <u>3/2/14</u> (Date)
The above plan of correction was approved by <u>[Signature]</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 31238 - 11/25/2013 - Riel, Becky
 PCH Name: MARKET STREET SPECIALIZED COMMUNITY RESIDENCE

1. REGULATION 55 Pa.Code §2600

2600.55(a) - Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following:

- (1) Evacuation procedures.
- (2) Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable.
- (3) The designated meeting place outside the building or within the fire-safe area in the event of an actual fire.
- (4) Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable.
- (5) The location and use of fire extinguishers.
- (6) Smoke detectors and fire alarms.
- (7) Telephone use and notification of emergency services.

2a. DESCRIPTION OF VIOLATION

Staff Person A, whose first day of work was 7/8/2013, did not receive orientation in evacuation procedures; staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable; the designated meeting place outside the building or within the fire safe area in the event of an actual fire; smoking safety procedures, the home's smoking policy and location of smoking areas; the location and use of fire extinguishers; smoke detectors and fire alarms; or telephone use and notification of emergency services until 7/11/2013.

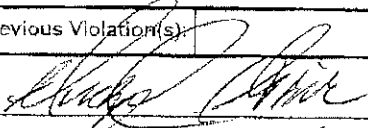
3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The Program Administrator completed the required trainings in the wrong priority order. The Program Director has retrained on 11/25/2013 the program administrator regarding the correct time lines for completing trainings. For the next year the Program Administrator will submit all training records for review to the Program Director.

Repeat Violation: No	Date(s) of Previous Violation(s)		
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Signature of Legal Entity Representative
 (Required on EVERY Page)



Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

WILLIAM L. GRAY, ESQ. Date 3-3-14

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The above plan of correction is approved as of 3/2/14
 (Date)

Plan of correction implementation status as of 3/2/14
 (Date)

The above plan of correction was approved by WB
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 31238 - 11/25/2013 - Riel, Becky
 PCH Name: MARKET STREET SPECIALIZED COMMUNITY RESIDENCE

1. REGULATION 55 Pa.Code §2600
 2600.65(g) - Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:
- (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert.
 - (2) Emergency preparedness procedures and recognition and response to crises and emergency situations.
 - (3) Resident rights.
 - (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101-10225.5102).
 - (5) Falls and accident prevention.
 - (6) New population groups that are being served at the home that were not previously served, if applicable.

2a. DESCRIPTION OF VIOLATION
 Direct Care Persons B & C did not receive training in fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert; emergency preparedness procedures and recognition and response to crises and emergency situations; resident rights; the Older Adult Protective Services Act; or falls and accident prevention during training year July 2012 to June 2013.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The Program Administrator had not updated the training plans as the trainings were completed. The Program Administrator was retrained in this area on 11/25/2013 and will update training plans at the end of each quarter. For one year the Program Administrator will submit the training plans to the Program Director at the end of each quarter. The Program Director will confirm that all completed trainings have been documented.

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Date 3-3-14

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 (Date)

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 (initials)

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Violation Report: 31238 - 11/25/2013 - Riel, Becky
 PCH Name: MARKET STREET SPECIALIZED COMMUNITY RESIDENCE

1. REGULATION 55 Pa.Code §2600
 2600.65(i) - A record of training including the staff person trained, date, source, content, length of each course and copies of any certificates received, shall be kept.

2a. DESCRIPTION OF VIOLATION

Staff Person D works at another home of the legal entity, but has provided coverage for this home. The home's record of training does not include orientation in evacuation procedures; staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable; the designated meeting place outside the building or within the fire safe area in the event of an actual fire; smoking safety procedures, the home's smoking policy and location of smoking areas; the location and use of fire extinguishers; smoke detectors and fire alarms; or telephone use and notification of emergency services for the home.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Any staff member that comes from another location to work will be trained on this programs specific fire safety and evacuation plans prior to working alone. The Program Administrator will ensure this is reviewed with each staff member that works in the program and that the training documentation is in the staff file.

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page) *[Handwritten Signature]*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *William Green* Date *3-3-14*

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 (Date)

The above plan of correction was approved by *[Signature]*
 (Initials)

Plan of correction implementation status as of 3/2/14
 (Date)

Fully Implemented
 Partially Implemented - Adequate Progress
 Partially Implemented - Inadequate Progress
 Not Implemented

Violation Report: 31238 - 11/25/2013 - Riel, Becky
 PCH Name: MARKET STREET SPECIALIZED COMMUNITY RESIDENCE

1. REGULATION 55 Pa.Code §2600.
 2600.87 - The home's rooms, hallways, interior stairs, outside steps, outside doorways, porches, ramps, evacuation routes, outside walkways and fire escapes shall be lighted and marked to ensure that residents, including those with vision impairments, can safely move through the home and safely evacuate.

2a. DESCRIPTION OF VIOLATION
 There is not a working source of light outside the front exit near the medication room.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The light was fixed on 1/8/2014. The Program Administrator will complete weekly checks of the entire house to ensure that lights and all equipment is in working condition. The Program Administrator will document that these weekly checks have been completed. The Program Administrator will schedule for all repairs to completed immediately.

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Date 3-3-14

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 (Date)

The above plan of correction was approved by OB
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
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- Not Implemented

Violation Report: 31238 - 11/25/2013 - Riel, Becky
 PCH Name: MARKET STREET SPECIALIZED COMMUNITY RESIDENCE

1. REGULATION 55 Pa.Code §2600
 2600.107(d) - The written emergency procedures shall be reviewed, updated and submitted annually to the local emergency management agency.

2a. DESCRIPTION OF VIOLATION
 The home's written emergency procedures have not been reviewed since 10/1/2012.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The emergency procedures have been reviewed and did not require any updates.
 The documentation has been updated. The Program Director will ensure that this is completed on an annual basis.

The program director will ensure that the up to date emergency procedures have been forwarded to the local Emergency Management Agency as required. as of 3/21/14

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
<i>Becky Riel, Program Director</i>	3-3-14

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The above plan of correction is approved as of 3/21/14
 (Date)

Plan of correction implementation status as of 3/21/14
 (Date)

The above plan of correction was approved by *BR*
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 31238 - 11/25/2013 - Riel, Becky
 PCH Name: MARKET STREET SPECIALIZED COMMUNITY RESIDENCE

1. REGULATION 55 Pa.Code §2600

2600.132(b) - A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.

2a. DESCRIPTION OF VIOLATION

The last fire safety inspection and drill observed by a fire safety expert was conducted on 9/26/2012.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The training and fire drill are scheduled for 2/12/14. In future this will be schedules well and advance of the due date. This will be monitored by the Program Administrator and the the Program Director.

Repeat Violation: No

Date(s) of Previous Violation(s):

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Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Date

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3/2/14
 (Date)

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3/2/14
 (Date)

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- Not Implemented

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CB
 (Initials)

Violation Report: 31238 - 11/25/2013 - Riel, Becky
 PCH Name: MARKET STREET SPECIALIZED COMMUNITY RESIDENCE

1. REGULATION 55 Pa.Code §2600
 2600.221(c) - A current weekly activity calendar shall be posted in a conspicuous and public place in the home.

2a. DESCRIPTION OF VIOLATION
 The home does not have a current weekly activity calendar posted in a public and conspicuous place in the home.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

There was a vacancy in the staffing position responsible for this task. In the future the Program Administrator will re-assign this task when there are staffing vacancies and complete weekly checks to confirm the activity schedule had been posted.

Repeat Violation: No	Date(s) of Previous Violation(s):	
Signature of Legal Entity Representative (Required on EVERY Page)		
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)		Date
William [unclear] [unclear]		3-3-14

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The above plan of correction is approved as of <u>3/6/14</u> (Date)	Plan of correction implementation status as of <u>3/6/14</u> (Date)
The above plan of correction was approved by <u>[initials]</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 31238 - 11/25/2013 - Riel, Becky
 PCH Name: MARKET STREET SPECIALIZED COMMUNITY RESIDENCE

1. REGULATION 55 Pa.Code §2600
 2600.224(a) - A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

2a. DESCRIPTION OF VIOLATION
 There is no preadmission screening form for Resident #2, admitted 5/30/2013.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The pre-screening had been misplaced and not filed correctly. It has been located and is in the residents file. In the future when these are completed they will remain in a central location at the program. The Program Administrator will ensure that these the pre-screening is available upon the admission to the program.

The pre-admission screening will be maintained in the resident's record. The administrator or designee will review each resident record within 30 days after admission to ensure that all required documents including the pre-admission screening are complete and present in the record. CB 3/21/14

Repeat Violation: No	Date(s) of Previous Violation(s):	
Signature of Legal Entity Representative (Required on EVERY Page)		
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)		Date
<i>Thomas Carson, CB</i>		<i>3-2-14</i>

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The above plan of correction is approved as of <u>3/21/14</u> (Date)	Plan of correction implementation status as of <u>3/21/14</u> (Date)
	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented
The above plan of correction was approved by <u>CB</u> (Initials)	