



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: July 29, 2015

Ms. Kristen Luckhaupt, Administrator
Canterbury Place
310 Fisk Street
Pittsburgh, Pennsylvania 15201

RE: Canterbury Place
License # 429490

Dear Ms. Luckhaupt:

As a result of the Department of Human Services' licensing inspection on February 23, 2015, 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.

Sincerely,

A handwritten signature in black ink that reads "Jon Kimberland" followed by a checkmark.

Jon Kimberland
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

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

PCH Name: CANTERBURY PLACE		License Number: 42949
Address: 310 FISK STREET, PITTSBURGH, PA 15201		County: Allegheny
Administrator: Kristin Luckhaupt		Region: WEST
Legal Entity Name: CANTERBURY PLACE		RECEIVED JUL 21 2015 WEST REGION FIELD OFFICE Human Services Licensing
Legal Entity Address: 310 FISK STREET, PITTSBURGH, PA 15201		
Certificate(s) of Occupancy 1-2 05/05/2012 City of Pittsburgh		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 54	Waking Staff: 41
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 02/23/2015: Pfaff, Vicki		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 78 Number of Residents Served: 48 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: 1		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 48 Have Mental Illness: 2 Have an Intellectual Disability: 1 Have a Mobility Need: 6 Have a Physical Disability: 0

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Violation Report: 42949 - 02/23/2015 - Pfaff, Vicki
PCH Name: CANTERBURY PLACE

JUL 23 2015

1. REGULATION 55 Pa.Code §2600

2600.54(a) - Direct care staff persons shall have the following qualifications:

- (1) Be 18 years of age or older, except as permitted in § 2600.54(b).
- (2) Have a high school diploma, GED diploma, or active registry status on the Pennsylvania nurse aide registry.
- (3) Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary personal care services with reasonable skill and safety.

WEST REGION FIELD OFFICE
Human Services Licensing

2a. DESCRIPTION OF VIOLATION

Direct care staff person A, hired on 1/12/15, does not have acceptable documentation of a high school diploma or a GED and does not have active registry status on the Pennsylvania nurse aide registry.

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.

UPMC utilizes Hire Right to complete pre-employment screenings which includes verification of having a high school diploma or GED. Verification is completed prior to first day of employment. Upon their 1st day orientation at the facility the new employee will provide a physical copy of their high school diploma/GED. Director of Resident care will document on new hire checklist that this was obtained. Checklist will be maintained in the employee's education folder. Administrator will audit all new hire folders monthly to ensure compliance.

7-21-15 - Direct care staff person A provided proof of required education. 7-29-15

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Kristin Luckhaupt

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

Kristin Luckhaupt RCHA

Date *7/21/15*

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

The above plan of correction is approved as of 7-29-15
(Date)

Plan of correction implementation status as of 7-29-15
(Date)

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

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

RECEIVED

JUL 21 2015

Violation Report: 42949 - 02/23/2015 - Pfaff, Vicki
PCH Name: CANTERBURY PLACE

WEC REGIONAL FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600
2600.65(d) - Direct care staff persons hired after April 24, 2006 may not provide unsupervised ADL services until completion of the following:

- (1) Training that includes a demonstration of job duties, followed by supervised practice.
- (2) Successful completion and passing the Department-approved direct care training course and passing of the competency test.
- (3) Initial direct care staff person training to include the following:
 - (i) Safe management techniques.
 - (ii) ADLs and IADLs.
 - (iii) Personal hygiene.
 - (iv) Care of residents with dementia, mental illness, cognitive impairments, mental retardation and other mental disabilities.
 - (v) The normal aging-cognitive, psychological and functional abilities of individuals who are older.
 - (vi) Implementation of the initial assessment, annual assessment and support plan.
 - (vii) Nutrition, food handling and sanitation.
 - (viii) Recreation, socialization, community resources, social services and activities in the community.
 - (ix) Gerontology.
 - (x) Staff person supervision, if applicable.
 - (xi) Care and needs of residents with special emphasis on the residents being served in the home.
 - (xii) Safety management and hazard prevention.
 - (xiii) Universal precautions.
 - (xiv) The requirements of this chapter.
 - (xv) Infection control.
 - (xvi) Care for individuals with mobility needs, such as prevention of decubitus ulcers (bed sores), incontinence, malnutrition and dehydration, if applicable to the residents served in the home.

2a. DESCRIPTION OF VIOLATION

Direct care staff person B, hired 9/30/13, began providing direct care services in October 2013. Direct care staff person B did not successfully complete and pass the Department-approved direct care training course and pass the competency test until 2/23/15.

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.

Staff person B completed the direct care competency test as part of the new hire process however certificate was not in her education folder. Employee was immediately removed from the floor to complete training and take the competency test. Once completed, copy of certificate was given to inspector and placed in education file. All current direct care employee education folders were audited for competency test and 100% of records were in compliance as of 2/23/15. New hire checklist was implemented and is completed by Director of Resident Care. Checklist is maintained in employee education folder. DRC documents employee completed direct care competency test on their 1st day orientation at facility. Administrator audits all new hire folders monthly to ensure compliance.

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

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Kristin Luckhaupt PCHA* Date *7/21/15*

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The above plan of correction is approved as of 7-28-15
(Date)

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

Plan of correction implementation status as of 7-28-15
(Date)

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

JUL 21 2015

Violation Report: 42949 - 02/23/2015 - Pfaff, Vicki
PCH Name: CANTERBURY PLACE

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

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.

2a. DESCRIPTION OF VIOLATION

At 4:36 p.m., there was an unlocked and unattended medication cart accessible to residents in the 5th floor hallway near the housekeeping closet. There was a drawer of medications left open and the following bottles of medication labeled with resident #1's name were setting on top of the cart: Doc-Q lacc 100 mg - 1 PO bid, Xarelto 20mg 1 PO qd, and Pravastin SOD tab 20 mg - 1 tab PO qd.

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.

Staff person responsible for the 5th floor cart was immediately removed from the med cart. She completed medication administration training class and successfully passed with greater than 90%. She successfully completed 4 medication observations prior to starting on the floor re-orientation. Re-orientation was in place for 1 month with nurse on duty. Prior to being scheduled unsupervised she successfully completed 4 additional medication observations.

Facility designed staff member completes random cart audits 2 times a month to ensure all medications are properly stored.

Director of Resident Care monitors staff when passing medications randomly on a quarterly basis to ensure compliance with medication administration and storage.

Newly trained and newly hired med techs will complete medication administration class and be required to pass with 90% or greater. Additionally they will be required to successfully pass 4 medication observations prior to being scheduled unsupervised on the floor. During their 6 month orientation period they will randomly be observed by facility designated staff member while passing medications 2 times a month and receive remedial training as needed.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Keistin Luckhaupt

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

Keistin Luckhaupt PCMA

Date 7/21/15

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(Date)

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