



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: January 13, 2016

Ms. Cheryl Fester, Administrator
Cranberry Place
Attn: Dan Grant, COO
9350 Babcock Boulevard
Pittsburgh, Pennsylvania 15237

RE: Cumberland Crossing Manor
9150 Babcock Boulevard
Pittsburgh, Pennsylvania 15237
Certificate #: 446160

Dear Ms. Fester:

As a result of the Department of Human Services' licensing inspection on September 10, 2015 and November 5, 2015 of the above facility, the violations with 55 Pa.Code Ch. 2800 (relating to Assisted Living Residences) 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. 2800 must be maintained.

Sincerely,

A handwritten signature in cursive script that reads "Gloria Emick".

Gloria Emick
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

LICENSING INSPECTION SUMMARY
Assisted Living Residences - 55 Pa.Code §2800

Name of Residence:

Cumberland Crossing Manor

Address:

9150 Babcock Boulevard
Pittsburgh, Pennsylvania 15237

License Number:

446160

Type of Inspection:

Partial

Reason(s) for Inspection:

Incidents

Notice:

Unannounced

On-site Inspection Dates and Department Representatives On-Site:

09/10/2015 - Dale Rosenblat

11/05/2015 - Dale Rosenblat and Gloria Emick

Off-Site Inspection Dates and Inspectors, if Applicable:

RECEIVED

JAN 08 2015

CENTRAL REGION FIELD OFFICE
Human Services Licensing

Regulation

§ 2800.23. Activities.

(a) A residence shall provide each resident with assistance with ADLs and appropriate cueing for ADLs as indicated in the resident's assessment and support plan.

Violation

Resident #1's Assessment and Support Plan, dated 8/21/2015, provides comprehensive instructions for direct care staff to assist the resident in meeting his/her assisted living care needs, including bladder/bowel management; and communicating appropriately to address his/her sensory and medical needs. Staff person A, failed to follow these instructions on 10/24/2015, which resulted in the resident becoming agitated as his/her needs were not met.

Plan of Correction

Staff person A was coached by administrator on November 10, 2015, on utilizing the resident's support plan when providing ADL assistance. It was explained to her that the support plans provide direction as to the needs of the resident.

She was also coached on that day regarding how to remove herself from an escalated situation and seek assistance from another staff member to approach resident.

All nursing staff was educated on support plans, reason for them, and the content on January 4, 2016 by the Resident Support Coordinator, whose primary role is to complete the ASPs.

ASPs are reviewed with all newly hired nursing staff during their orientation, by the Resident Support Coordinator.

Attached is the discussion sheet and attendance sheet.

Printed Name and Title of Legal Entity Representative (Required on all pages)

Cheryl Fester Administrator

Signature of Legal Entity Representative (Required on all pages)

Cheryl Fester

Date

January 8, 2016

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

The above plan of correction is approved as of 1-12-16
(Date)

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

Plan of correction implementation status as of 1-12-16 :
(Date)

Fully Implemented

Partially Implemented - Adequate Progress

Partially Implemented - Inadequate Progress

Not Implemented

Regulation

§ 2800.42. Specific rights.

(c) A resident shall be treated with dignity and respect.

Violation

On 8/28/2015 Staff Person B requested Resident #2 to remove his/her clothing in order to get a blood pressure reading. The request caused Resident #2 to feel uncomfortable. The incident was reported to the residence.

Plan of Correction

On August 28, 2015, staff person B was suspended pending investigation. Employee was terminated [REDACTED] 2015.

A staff meeting was held on September 29, 2015, discussing dignity and respect. The administrator was the facilitator.

During the interview process by hiring managers, potential candidates are explained the UPMC Values, which one of them is dignity & respect. The values are also reviewed with new hires during their orientation period with the Resident Support Coordinator or Dining Room Supervisor.

Attached is the attendance sheet for September 29, 2015

Printed Name and Title of Legal Entity Representative (Required on all pages)

Cheryl Fester, Administrator

Signature of Legal Entity Representative (Required on all pages)

Cheryl Fester

Date

January 8, 2016

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The above plan of correction is approved as of *1-12-16*
(Date)

Plan of correction implementation status as of *1-12-16*;
(Date)

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

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

<p>Regulation § 2800.52. Staff hiring, retention and utilization Hiring, retention and utilization of staff persons shall be in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102), 6 Pa. Code Chapter 15 (relating to protective services for older adults) and other applicable regulations.</p>
<p>Violation Staff person A was hired on [REDACTED] 2014 after moving from another state. The Residence failed to obtain an FBI check in accordance with the Older Adult Protective Services Act.</p>
<p>Plan of Correction</p> <p>On November 9, 2015, staff person A was given the information to obtain an FBI clearance per the PA Older Adults Protective Services Act. The staff person was instructed to not enter a residents room unaccompanied until the clearance was obtained. She was supervised by another staff member at all times.</p> <p>The clearance was received November 12, 2015, and emailed to the HR Representative. The clearance determined that applicant meets the criteria for employment under the Older Adults Protective Services Act. The employee was resumed to her normal schedule.</p> <p>The clearances are obtained by UPMC's Talent Acquisition department. The following is their plan of correction:</p> <p>Clearance requirements and instructions are added to all offer and transfer letters for new hires. A biweekly audit of all required licensure and clearances for our facilities has been implemented to ensure all employees are compliant by due dates. Managers will also take an active role in ensuring their direct employees have all required clearances and licensures by due dates.</p> <p>Attached is the clearance letter for staff member A.</p> <p>This manager contacts Talent and Acquisition and Human Resources when an applicant we are interested in hiring, has not been a resident of Pennsylvania for three years.</p>

Printed Name and Title of Legal Entity Representative (Required on all pages) <i>Cheryl Fester, Administrator</i>	
Signature of Legal Entity Representative (Required on all pages) <i>Cheryl Fester</i>	Date <i>January 8, 2016</i>
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!	
The above plan of correction is approved as of <u>1-12-16</u> (Date)	Plan of correction implementation status as of <u>1-12-16</u> (Date)
The above plan of correction was approved by <u>EF</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented – Adequate Progress <input type="checkbox"/> Partially Implemented – Inadequate Progress <input type="checkbox"/> Not Implemented