



pennsylvania
DEPARTMENT OF HUMAN SERVICES

OCT 14 2016

Mr. William R. Polachek, President/CEO
Grand Residence of Upper St. Clair, Inc.
45 McMurray Road
Upper St. Clair, Pennsylvania 15241

RE: The Grand Residence at Upper St. Clair
License #: 432320

Dear Mr. Polachek:

As a result of the Department of Human Services' annual licensing inspections on June 9, 2016 and June 10, 2016 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, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

Violation Report: 43232 - 06/09/2016 - Georgoulis, Karen
 PCH Name: THE GRAND RESIDENCE AT UPPER ST CLAIR
 WEST REGION FIELD OFFICE
 Human Services Licensing

1. REGULATION 55 Pa.Code §2600
 2600.91 - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

2a. DESCRIPTION OF VIOLATION
 On 6/9/16, none of the required telephone numbers were posted on or by the telephone in bedroom #302.

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.

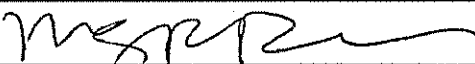
The required emergency phone numbers were posted on the telephone in the bedroom in suite #302 on the day of inspection, June 9, 2016. (See Attachment 2A).

All staff will be educated by Friday, September 9, 2016 regarding the importance of having emergency contact numbers posted on all telephones with an outside line (See Attachment 2B). If emergency assistance is required, staff, residents, and visitors must be able to reach assistance immediately.

Upon a resident's admission to the home, the maintenance staff and community development staff will check all telephones in their suite to ensure that the emergency contact numbers are posted on each one. Management, housekeeping and direct care staff will check for the posted emergency numbers as their daily tasks are performed. The administrative assistant will be notified immediately, if numbers are missing or unreadable, and the required emergency phone numbers will be replaced.

The shift supervisors will audit all the telephones with an outside line weekly to ensure the required emergency phone numbers are accessible on/by each phone (See Attachment 2C). The community development staff or assistant executive director will audit all telephones with an outside line monthly to ensure the required emergency phone numbers are accessible on/by each phone. (See Attachment 2D).

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) MELISSA POLACHNIK FILIPKIC EXECUTIVE DIRECTOR Date 9/2/2016

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

The above plan of correction is approved as of <u>9-7-16</u> (Date) The above plan of correction was approved by <u>SP</u> (Initials)	Plan of correction implementation status as of <u>9-7-16</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
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WEST REGION FIELD OFFICE
Human Services Licensing

Violation Report: 43232 - 06/09/2016 - Georgoulis, Karen
PCH Name: THE GRAND RESIDENCE AT UPPER ST CLAIR

1. REGULATION 55 Pa.Code §2600

2600.101(j)(7) - Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on at bedside.

2a. DESCRIPTION OF VIOLATION

On 6/9/16, there was no lamp or other source of lighting that could be turned on or off at the bedside on resident bedroom #303.

On 6/9/16, there was no lamp or other source of lighting that could be turned on or off at the bedside on resident bedroom #306. The closest lamp was approximately six feet away from the bed.

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.

On June 9, 2016, with the permission from the residents living in suite 303 and 306, lamps were moved closer to the beds so the light sources could be turned on/off at bedside. (See Attachment 3A). The lamps were turned on and checked to ensure that they were in proper working order.

All Staff will be educated by Friday, September 9, 2016 that all residents need to have an operable lamp or light source that can be turned on at their bedside. (See Attachment 3B). The light source will provide the resident sufficient light to move safely around the room in the dark, reducing the risk for falls or injuries.

Upon a resident's admission to the home, the maintenance staff and community development staff will check that there is an operable light within reach of that resident's bed that provides adequate illumination for safe ambulation. All direct care, housekeeping and maintenance staff will also check lamps and additional light sources during their routine tasks to ensure that they are within the reach of the resident's bedside and in proper working order.

Staff will notify the administrative assistant if a lamp or other light source is not in working order. Should a lamp or other light source require a new light bulb or battery, maintenance staff will replace the light bulb or battery immediately.

Weekly the shift supervisors will audit all bedsides to ensure that there is a light source within reach of each resident's bedside at all times and that the light is operable (See Attachment 3C). Monthly community development staff or the assistant executive director will audit all bedsides to ensure that there is a light source within reach of each resident's bedside at all times and that the light is operable (See Attachment 3D).

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)

MELISSA POLACHEK FILIPOVIC EXECUTIVE DIRECTOR

Date 9/2/2016

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(Date)

Plan of correction implementation status as of 9-7-16
(Date)

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

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