



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

DEC 15 2017

Mr. Robert J. Baker,  
Chief Executive Officer  
Keystone Human Services, Inc.  
124 Pine Street  
Harrisburg, Pennsylvania 17101

RE: McKinley St. PCH  
1280 East McKinley Street  
Chambersburg, Pennsylvania 17202  
Certificate #: 320340

Dear Mr. Baker:


As a result of the Department of Human Services' annual licensing inspection on October 26, 2017 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.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to [https://www.surveymonkey.com/r/BHSL\\_Inspection](https://www.surveymonkey.com/r/BHSL_Inspection).

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

  
Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary



Violation Report: 32045 - 10/26/2017 - Palermo, Michael  
 PCH Name: MCKINLEY ST. PCH

**1. REGULATION 55 Pa.Code §2600**

2600.25(b) - The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

**2a. DESCRIPTION OF VIOLATION**

The contract for Resident #1 was not signed by the payer.

**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.*

1. The contract for Resident #1 was sent to the resident's payee and who signed the contract and faxed it back to the program on 10/25/17. The contract was reviewed with Resident #1 and signed by the Program Administrator(PA) and Resident #1 on 10/25/17.
2. During the licensing visit, it was noted the contract was not signed. To ensure all future contracts are signed upon admission by staff, resident, and payee, the Program Administrator or their designee, will review the individual's contract within 24 hours of admission.
3. The Program Administrator met with the Personal Care Specialist(PCS) and the LPN on 10-24-2017 to review the licensing requirement of signed contracts upon an individual's admission.
4. In the future, the PA, PCS, and LPN will review all intake paperwork, including the contract within 24 hours of admission and prior to the contract being placed in the individual's file to ensure a completed and signed contract for each resident.

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)

Robert J. Baker CEO Date 11/17/17

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

The above plan of correction is approved as of 11-22-17  
 (Date)

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

Plan of correction implementation status as of 11-22-17  
 (Date)

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

Violation Report: 32045 - 10/26/2017 - Palermo, Michael  
 PCH Name: MCKINLEY ST. PCH

**1. REGULATION 55 Pa.Code §2600**

2600.191 - The home shall educate the resident on the right to question or refuse a medication if the resident believes there may be a medication error. Documentation of this resident education shall be kept.

**2a. DESCRIPTION OF VIOLATION**

Resident #1 has not been educated to the resident's right to question or refuse medication if the resident believes that there may be a medication error.

**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.*

1. The contract template, located on the desktop computer was edited by the PCS, adding the statement that residents had the right to refuse medication 10/24/17. On this date the resident was notified of the change in the contract and signed a new contract.
2. The contract was saved as a blank template, on the desktop computer, with the changes to include that residents had the right to refuse medication. All old contract templates were deleted by the PA on 10/24/17 to ensure the correct contract template is utilized going forward.
3. On 10/25/17 all residents charts were reviewed by the PA and PCS to ensure all resident contracts included the right to refuse medication. The review showed all other resident's charts included the correct contract This information will be shared with all staff during a staff meeting on 11/15/17.
4. The Program Administrator will monitor the templates saved on the program computer to ensure the most current templates are available.

Repeat Violation: Yes	Date(s) of Previous Violation(s):	11/14/2016
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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
Robert J. Baker CED	11/17/17

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

The above plan of correction is approved as of 11-20-17  
 (Date)

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

Plan of correction implementation status as of 11-20-17  
 (Date)

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

Violation Report: 32045 - 10/26/2017 - Palermo, Michael  
 PCH Name: MCKINLEY ST. PCH

**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**

The pre-admission screening form for Resident #1, admitted [REDACTED], does not include a determination that the home can meet the service needs of the resident.

**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.*

- Pre-Admission Screening form (see)*
1. On 10/24/17 the contract was reviewed and the box was checked to state the PCH was able to meet the individuals need. This was completed by the PA and the change was reviewed with the Resident #1 on 10/25/17, to make them aware of the addition to their contract. *(Pre-Admission Screening form. See)*
  2. To prevent future occurrences, the PA or designee, will review the preadmission screening upon completion, and also have the PCS and/or LPN look over the completed contract to ensure all necessary areas are are completed.
  3. During the monthly staff meeting on 11/25/17, the PA reviewed with all of the staff, how to complete the pre-admission forms. When preadmission paperwork is completed, two staff, on shift, who are working, will review the paperwork for accuracy.
  4. By having more than one staff (this could be the PA, PCS, LPN, or PCA) review the pre-admission paperwork, it will ensure that all necessary sections are completed.

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>Robert J. Baker CEO</i>	<i>11/17/17</i>

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

The above plan of correction is approved as of 11-20-17  
 (Date)

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

Plan of correction implementation status as of 11-20-17  
 (Date)

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