



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAY 23 2018

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

RE: Keystone Human Services-Queen St SCR
2033 South Queen Street
York, Pennsylvania 17402
Certificate #: 329500

Dear Mr. Baker:

As a result of the Department of Human Services' Adult Residential Licensing's annual licensing inspection on April 12, 2018 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.

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.

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: 32950-04/12/2018- Showers, Michael
PCH Name: KEYSTONE HUMAN SERVICES QUEEN ST SCR

1. REGULATION 55 Pa. Code §2600
2600.18 - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

2a. DESCRIPTION OF VIOLATION
The home is heated by a Peerless brand Boiler that does not have a valid certificate of Boiler or Pressure Vessel Operation" issued by the Pennsylvania Department of Labor and Industry.

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. During 2017, there were items that needed to be repaired on the boiler. Repairs were made, however, documentation of the repairs were not sent in to the Department of Labor and Industry, therefore, a certificate was not issued. Documentation was sent in to Labor and Industry on 4-18-2018, however, they only print certificates at the end of each month and are not able to print one out prior to the end of the month.
2. Labor and Industry will send a certificate on 4-30-2018 to Queen St. SCR. Keystone will forward the certificate to DHS as soon as it is received.
3. Attached is the documentation that was sent to Department of Labor and Industry, verifying the work was completed.
4. To prevent this from occurring again, the PA will review all citations from the previous year, to make sure the same citation doesn't occur again. (It should be noted that there was a different PA working in the program last year).
5. The Regional Director will confirm that the Department of Labor and Industry certificate has been received and filed.

* The home shall implement a tracking system for Boiler Certification renewal. This tracking system shall be reviewed during each Quality Management meeting.

BAS 4/30/18

Repeat Violation: Yes | Date(s) of Previous Violation(s): 04/13/2017

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, KSS | Date 4/26/18

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

The above plan of correction is approved as of 4/30/18 (Date)

Plan of correction implementation status as of 4/30/18 (Date)

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

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

Violation Report: 32950-04/12/2018- Showers, Michael
 PCH Name: KEYSTONE HUMANSERVICES QUEENST SCR

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

The annual training provided to direct care staff person A did not include the required training in "Falls and accident prevention" during training year 2017.

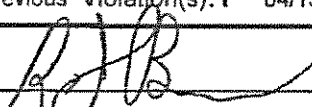
3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

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. During 2017, there was one employee who did not receive all of her required annual trainings, **including falls and accident prevention**. The employee had been off work, however, she did not make up the trainings when she returned.
- 2. Keystone has implemented a new training tool/program called Relias. Relias tracks all required trainings and sends a report to supervisors, alerting them as to when required trainings are due. Relias sends out several reminders when a training is coming due, to both the employee and the employees supervisor.
- 2. The Program Administrator will review training records on a monthly basis to assure the required trainings are being completed on time.
- 3. The Program Administrator will print off training records for each employee and place them in the employee binder.
- 4. Relias tracks trainings throughout the year. All required trainings will be completed by 12-31-2018.

Repeat Violation: Yes | Date(s) of Previous Violation(s): 04/13/2017

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Date 4/26/18

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

Violation Report: 32950-04112/2018- Showers, Michael
 PCH Name: KEYSTONE HUMANSERVICES QUEEN ST SCR

1. REGULATION 55 Pa. Code §2600
 2600.102(d)(1)- Toilet and bath areas must have grab bars, hand rails or assist bars.

2a. DESCRIPTION OF VIOLATION

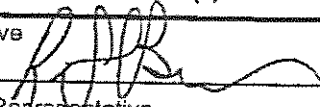
There is no grab bar, hand rail or assist bar beside or near the toilet in the first floor half bathroom off the kitchen area.

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. A grab bar was installed in the half-bath on the first floor of the Queen St. SCR, on 4-19-2018. (Picture is attached)

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) Robert J. Baker, CEO, KSS

Date 4-26-18

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 (Date)

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

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 (Date)

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Violation Report: 32950-04/12/2018- Showers, Michael
 PCH Name: KEYSTONE HUMAN SERVICES QUEEN ST SCR

1. REGULATION 55 Pa. Code §2600

2600.132(d)- Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.

2a. DESCRIPTION OF VIOLATION

According to fire drill records of the home, during the fire drill conducted on 11/29/17 at 3 am, only 6 of the 8 residents evacuated to a public thoroughfare or a fire safe area.

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. During fire drills, the staff on duty will insure that all of the residents evacuate the program to a public thoroughfare or a fire safe area., within the appropriate time frame for a fire drill.
2. If all of the residents do not exit the program to fire safe area, the fire drill will need to be conducted on another date, during the same/similar time frame. (An example is if it is a overnight fire drill, it will be held during the overnight hours)
3. The Program Administrator will review all fire drill documentation, within 48 hours of the drill. If all individuals do not exit to a fire safe area, the Program Administrator will schedule another fire drill. This process will continue until all residents are able to exit to a fire safe area.
4. The Program Administrator will sign off on all successful fire drills.

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

Violation Report: 32950-04/1212018- Showers, Michael
 PCH Name: KEYSTONE HUMAN SERVICES QUEENST SCR

1. REGULATION 55 Pa. Code §2600
2600.132(e)- A fire drill shall be held during sleeping hours once every 6 months.

2a. DESCRIPTION OF VIOLATION
 The most recent drill conducted during sleeping hours was on 11/29/17. The previous sleeping hours drill was performed on 4/19/17.

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. An over-night fire drill will be conducted by ████████ between the hours of 3AM-5AM.
2. A second over-night fire drill we be conducted by ████████ between the hours of 11PM-1AM.
3. Going forward, all over-night fire drills will remain on this 6 month cycle, and the Program Administrator will be responsible for conducting the overnight fire drills.
4. The Program Administrator will monitor the completion of the overnight fire drills for the appropriate times, by adding the overnight fire drill to the monthly checklist.

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