pennsylvania
DEPARTMENT OF HUMAN SERVICES

November 23, 2020:

Mr. Jesse McLean, Executive Director
5500 Corporate Drive, Suite 400
Pittsburgh, Pennsylvania 15237

RE: Pressley Ridge School for the Deaf,
Bldg. 1
530 Marshall Avenue
Pittsburgh, Pennsylvania 15214
License #446910

Dear Mr.McLean,

As a result of the Pennsylvania Department of Human Services, Office of Children, Youth and Families, ("Department") licensing inspections on February 12, 2020 to February 13, 2020 of the above facility, the citations specified on the enclosed Licensing Inspection Summary (LIS) were found.

We have determined that your plan of correction is:
Acceptable - All citations specified on the plan of correction must be corrected by the dates specified on the License Inspection Summary (violation report) and continued compliance with Department statutes and regulations must be maintained.

Sincerely,

Greg Holts /ADL

Greg Holts
Licensing Technician

Enclosure:
LIS

cs: Western Region, OCYF

Department of Human Services
Office of Children, Youth and Families
LICENSING/APPROVAL/REGISTRATION INSPECTION SUMMARY
55 PA.CODE CHAPTER 3800

OFFICE OF CHILDREN, YOUTH & FAMILIES
RECEIVED
JUN 09 2020
REFER TO:
WESTERN REGION

Agency/Facility Information

Name: *PRESSLEY RIDGE SCHOOL FOR THE DEAF - BLDG 1*
Address: *530 MARSHALL AVENUE,, PITTSBURGH, PA 15214*
Phone: *4123216995*
License #: *4469*
County: *ALLEGHENY*

Inspection Information

Start Date: *02/12/2020* **End Date:** *02/13/2020* **Type:** *Renewal* **Notice:** *Announced Visit*
Inspector(s): *Greg Holts, Bonnie Studor, Mary Lou Warchola, Keith Witt, and Matthew Rahuba*

Inspection Narrative

The Department of Human Services, Office of Children, Youth and Families, Western Region (Department) conducted an annual licensing inspection of Pressley Ridge School for the Deaf – Building 1 on 2/12/2020 to 2/13/2020 for licensing year 5/15/2020 to 5/15/2021. During the inspection, the Department reviewed: 10% of the agency's child files, including discharged child files, and all personnel files, which included new and tenured employees. All children's records were in compliance with state and federal laws and regulations. During the personnel file review, the Department identified two personnel files did not contain a health statement within the mandatory two-year period. In addition, two personnel files did not contain an approved FBI clearance. These regulatory violations are further detailed below. During the review of the facility's fire drill log, the Department identified fire drills conducted during sleeping hours had not occurred at least every 6 months. This is further detailed below. A physical site inspection was completed, and there were no regulatory concerns noted. One child and one staff were interviewed and made positive reports about the agency. The child stated he frequently goes on home passes, and he stated he feels safe at the facility. The staff member explained the establishment of positive staff to peer relationships was important for de-escalation.

Signature

The legal entity representative must complete the "Provider's Plan of Correction or Response," sign on the signature line below and date all pages of this document. Return this entire document when completed to your Regional Office no later than 06/10/2020.

Amy McQuillan — 6/8/2020
Signature of Legal Entity Representative — Date

Amy McQuillan — Program Director — 412-719-4826
Name of Legal Entity Representative — Title — Telephone Number

OCYF Regional Staff Approval

Emily J Holtz — 6-17-2020
Signature — Date

11/16/2020
Signature — Date

Amber D. Karp — 6/19/2020
Signature — Date

Date: 6/8/2020

3800.51 Child Abuse and Criminal History Checks

1. **55 PA Code Chapter**

3800.51. Child abuse and criminal history checks shall be completed in accordance with 23 Pa.C.S. § § 6301—6385 (relating to the Child Protective Services Law) and Chapter 3490 (relating to protective services).

Area of Non-Compliance

During review of the personnel files, the Department identified Staff member C's file contained an FBI clearance obtained through the Pennsylvania Department of Education. When Staff Member C attempted to obtain an FBI clearance through the Pennsylvania Department of Human Services in 2019, the documentation provided to the employee indicated Childline needed further details in order to provide a valid clearance to the employee. This information was not included in the personnel file, nor was there an approved FBI clearance. It was verified this staff member was working with the children without the approved clearance.

During review of the personnel files, the Department identified the personnel file of Staff Member D contained an FBI clearance from the Pennsylvania Department of Education. The personnel file for Staff Member D contained a receipt the staff member had applied for an FBI clearance through the Pennsylvania Department of Human Services; however, the clearance was not located in the personnel file. It was verified the staff member was working with the children without having the approved clearance.

Provider's Plan of Corrective Action or Response

The PRSD Program Director worked with the Human Resources Department to address the staff file issues. The PRSD Program Director will have regular meetings with Human Resources and will conduct an audit of staff files at the HR offices at least once annually. HR will provide the program with new hire clearances. PRSD will suspend any current staff who do not obtain a DHS clearance prior to the last clearance expiring. Any residential staff with an active PDE clearance will be requireded to obtain a DHS clearance.

Status of Correction: 6/19/2020, ADK All proper clearances were received and were verified to be in the staffs files.

3800.132 Fire Drills

1. **55 PA Code Chapter**

3800.132.e. A fire drill shall be held during sleeping hours at least every 6 months.

Area of Non-Compliance

During review of the facility's annual fire drill log, the Department noted a fire drill had occurred during sleeping hours on February 15, 2019 at 2:17am. A second fire drill occurred during sleeping hours on September 19, 2019 at 3:20am, exceeding the regulatory time frame of six months.

Provider's Plan of Corrective Action or Response

The Pressley Ridge School for the Deaf management team met with the Pressley Ridge Maintenance Department and Oxford Development, who manages the Pressley Ridge Maintenance Department, to assure that the 3800 requirements are understood. They also reviewed the need for greater variability in the times that drills occur. The PRSD Program Director will meet regularly with the assigned Oxford Development Supervisor to assure that fire drills are being conducted on time, including two overnight drills within the 6 month regulatory rime frame, as well as with greater variability in times for all drills.

Status of Correction:

Date: 6/8/2020

3800.151 Staff Health Statement

1. **55 PA Code Chapter**

3800.151. A staff person or volunteer who comes into direct contact with the children or who prepares or serves food, shall have a statement signed and dated by a licensed physician, certified registered nurse practitioner or licensed physician's assistant, within 12 months prior to working with children or food service and every 2 years thereafter, stating that the person is free of serious communicable disease that may be spread through casual contact or that the staff person has a serious communicable disease that may be spread through casual contact but is able to work in the facility if specific precautions are taken that will prevent the spread of the disease to children.

Area of Non-Compliance

During review of the personnel files, the Department noted Staff member A had a signed health statement dated 03/08/2019; however, their previous health statement was dated 10/31/2016, exceeding the regulatory two year time period.

During review of the personnel files, the Department noted Staff member B had a signed health statement dated 02/15/2019, and their prior health statement was dated 04/17/2016, exceeding the regulatory two year time period.

Provider's Plan of Corrective Action or Response

The PRSD Program Director worked with the Human Resources Department to address the staff file issues. The PRSD Program Director will have regular meetings with Human Resources and will conduct an audit of staff files at the HR offices at least once annually. HR will allow the program to new hire physicals to assure they are completed correctly. Any residential staff who fails to obtain a completed physical prior to the due date will be removed from the schedule until they submit a completed physical. The PRSD Office manager will track physicals and will prompt staff to complete them.

Status of Correction:

On 6.17.20, The Department review one staff file and the fire drills from March to June. The staff contain up to date clearances and a health statement. The fire drills were reviewed and were compliant with regulations.

Gary J Hall

Date: 6/8/2020