

Department of Human Services  
Bureau of Human Service Licensing

December 3, 2020

ALVIN ALLISON, JR., PRESIDENT/CEO  
BAPTIST HOMES SOCIETY  
489 CASTLESHANNON BOULEVARD  
PITTSBURGH, PA 15234

RE: PROVIDENCE POINT  
200 ADAMS AVENUE  
PITTSBURGH, PA, 15243  
LICENSE/COC#: 44143

Dear Mr. Allison, Jr.,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/21/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Jody Garvey

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Department of Human Services  
Bureau of Human Service Licensing  
LICENSING INSPECTION SUMMARY - PUBLIC**

**Facility Information**

Name: *PROVIDENCE POINT* License #: *44143* License Expiration Date: *01/04/2021*  
 Address: *200 ADAMS AVENUE, PITTSBURGH, PA 15243*  
 County: *ALLEGHENY* Region: *WESTERN*

**Administrator**

Name: *Kim Salvio* Phone: *412-489-3566* Email: *ksalvio@baptisthomes.org*

**Legal Entity**

Name: *BAPTIST HOMES SOCIETY*  
 Address: *489 CASTLESHANNON BOULEVARD, PITTSBURGH, PA, 15234*  
 Phone: *4124893560* Email: *AALLISON@BAPTISTHOMES.ORG; Jogarvey@pa.gov*

**Certificate(s) of Occupancy**

Type: *I-1* Date: *06/09/2009* Issued By: *Township of Scott*  
 Type: *I-2* Date: *11/10/2009* Issued By: *Township of Scott*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *93* Waking Staff: *70*

**Inspection**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Incident* Exit Conference Date: *10/21/2020*

**Inspection Dates and Department Representative**

*10/21/2020 - On-Site: Desmond Grace*

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *84* Residents Served: *67*

**Secured Dementia Care Unit**

In Home: *No* Area: Capacity: Residents Served:

**Hospice**

Current Residents: *5*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *67*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *26* Have Physical Disability: *0*

## Inspections / Reviews

## 10/21/2020 - Partial

Lead Inspector: *Desmond Grace*Follow-Up Type: *POC Submission*Follow-Up Date: *11/19/2020*

## 11/19/2020 - POC Submission

Lead Reviewer: *Jody Garvey*Follow-Up Type: *POC Submission*Follow-Up Date: *11/24/2020*

## 11/20/2020 - POC Submission

Lead Reviewer: *Jody Garvey*Follow-Up Type: *Document Submission*Follow-Up Date: *12/20/2020*

## 12/3/2020 - Document Submission

Lead Reviewer: *Jody Garvey*Follow-Up Type: *Not Required*

## 15a - Resident Abuse Report

### 1. Requirements

2600.

- 15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

### Description of Violation

*On 10/18/20 at approximately 9:00 p.m., staff person A and resident #1 were seated alone in the resident's room. Staff person B overheard staff person A say, "I am going to punch you in the face," from the hallway while walking past the room. Staff person B entered the room and told staff person A not to talk to the resident like that. However, the event was not reported to the local Area Agency on Aging.*

### Plan of Correction

Accept

*Staff Person A was placed on Administrative Leave on 10-19-2020 and subsequently terminated from employment as of 10-29-2020. Education Plan detailing definitions of abuse, residents rights and reporting regulations/instructions along with contact information for DHS and AAA created for all staff. "Quick Tips" created for staff to RECOGNIZE, REPORT AND REMOVE staff immediately when abuse is observed, suspected or reported. Education plan is attached and will be completed by December 15, 2020 for all Personal Care employees. Staff also educated that this plan is also put into RED BINDERS and located on each nursing unit and on each resident floor next to the Emergency Operations Binder for staff use. "Quick Tips" is a tip sheet created for staff to keep as a reminder for how to proceed if abuse is suspected, recognized or reported. "Quick Tips" is being attached to each employee paycheck the week ending November 20, 2020. Education includes that all staff are required to report abuse immediately using the information provided in the education, RED BINDERS and Quick Tips.*

**Completion Date:** 12/15/2020

### Document Submission

Implemented

*Confidential interviews regarding abuse and resident rights violation are currently done monthly for QI and related to a past violation. Updated interview questions are attached and will be done with at least 5 residents weekly for 3 months as directed and then continue monthly by a designated staff member and responsible party will be Pat Connolly/Joyce Reedy/Kim Salvio.*

## 15b - Supervisor Plan

### 1. Requirements

2600.

- 15.b. If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

### Description of Violation

*On 10/18/20 at approximately 9:00 p.m., staff person A and resident #1 were seated alone in the resident's room. Staff person B overheard staff person A say, "I am going to punch you in the face," from the hallway while walking past the room. Staff person B entered the room and told staff person A not to talk to the resident like that. However, staff person A continued to work unsupervised in the home for approximately 1 1/2 hours after the event.*

## 15b - Supervisor Plan (continued)

**Plan of Correction****Accept**

Staff Person A was placed on Administrative Leave on 10-19-2020 and subsequently terminated from employment as of 10-29-2020. Policy 104 on Preventing Resident Abuse has been created for Personal Care. This policy will be reviewed with all staff in Personal Care. Special Attention to VI.1-5. concerning reporting abuse. Additionally, the above detailed Education Plan detailing definitions of abuse, residents rights and reporting regulations/instructions along with contact information for DHS and AAA created for all staff. "Quick Tips" created for staff to RECOGNIZE, REPORT AND REMOVE staff immediately when abuse is observed, suspected or reported. Education plan is attached and will be completed by December 15, 2020 for all Personal Care employees. Staff also educated that this plan is also put into RED BINDERS and located on each nursing unit and on each resident floor next to the Emergency Operations Binder for staff use. "Quick Tips" is a tip sheet created for staff to keep as a reminder for how to proceed if abuse is suspected. "Quick Tips" is being attached to each employee paycheck the week ending November 20, 2020. Education includes that all staff are required to report abuse immediately using the information provided in the education, RED BINDERS and Quick Tips. Policy 104 is also included in the RED BINDER.

Completion Date: 12/15/2020

**Document Submission****Implemented**

Confidential interviews regarding abuse and resident rights violation are currently done monthly for QI and related to a past violation. Updated interview questions are attached and will be done with at least 5 residents weekly for 3 months as directed and then continue monthly by a designated staff member and responsible party will be Pat Connolly/Joyce Reedy/Kim Salvio.

## 42c - Treatment of Residents

**1. Requirements**

2600.

42.c. A resident shall be treated with dignity and respect.

**Description of Violation**

On 10/18/20 at approximately 9:00 p.m., staff person A and resident #1 were seated alone in the resident's room. Staff person B overheard staff person A say, "I am going to punch you in the face," from the hallway while walking past the room. Staff person B entered the room and told staff person A not to talk to the resident like that.

**Plan of Correction****Directed**

Staff Person A was placed on Administrative Leave on 10-19-2020 and subsequently terminated from employment as of 10-29-2020. Education on Abuse, Resident Rights, Abuse Reporting and Policy 104 "Preventing Resident Abuse" will be given to all employees and always available on each resident care floor as well as in the nurses station in the RED BINDERS.

**(Directed)-**

Beginning 11/27/20, the administrator or designated staff person will conduct weekly confidential interviews with at least 5 residents per week for 3 months, then monthly thereafter. The interviews will include questions related to resident rights and treatment by staff members. Any violations of resident rights will be reported in accordance with §2600.15(a) and §2600.16(c). Documentation of interviews will be submitted to the Department. **J.G. 11/20/20**

Completion Date: 12/15/2020

42c - Treatment of Residents (*continued*)**Document Submission****Implemented**

*Confidential interviews regarding abuse and resident rights violation are currently done monthly for QI and related to a past violation. Updated interview questions are attached and will be done with at least 5 residents weekly for 3 months as directed and then continue monthly by a designated staff member and responsible party will be Pat Connolly/Joyce Reedy/Kim Salvio.*