

Department of Human Services
Bureau of Human Service Licensing

April 28, 2021

██████████ CHIEF EXECUTIVE OFFICER
KEYSTONE HUMAN SERVICES
4391 STURBRIDGE DRIVE
HARRISBURG, PA 17110

RE: KEYSTONE COMMUNITY MH
1009 OLD NOBLESTOWN ROAD
OAKDALE, PA, 15071
LICENSE/COC#: 43876

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/29/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Janine Wenzig

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services
Bureau of Human Service Licensing

April 19, 2021

██████████ CHIEF EXECUTIVE OFFICER
KEYSTONE HUMAN SERVICES
4391 STURBRIDGE DRIVE
HARRISBURG, PA 17110

RE: KEYSTONE COMMUNITY MH
1009 OLD NOBLESTOWN ROAD
OAKDALE, PA, 15071
LICENSE/COC#: 43876

Dear ██████████,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 01/29/2021 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,
Janine Wenzig

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: *KEYSTONE COMMUNITY MH* **Licen e #:** *43876* **Licen e Expiration Date:** *04/29/2021*
Addr e : *1009 OLD NOBLESTOWN ROAD, OAKDALE, PA 15071*
County: *ALLEGHENY* **Region:** *WESTERN*

Administrator

Name: [REDACTED] **Phone:** *7243073085* **Email:** [REDACTED]

Legal Entity

Name: *KEYSTONE HUMAN SERVICES*
Address: *4391 STURBRIDGE DRIVE, HARRISBURG, PA, 17110*
Phone: *7243073085* **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: *Other* **Date:** *05/28/1981* **Issued By:** *Dept L & I*

Staffing Hours

Re ident Support Staff: *0* **Total Daily Staff:** *7* **Waking Staff:** *5*

Inspection

Type: *Full* **Notice:** *Unannounced* **BHA Docket #:**
Reason: *Renewal* **Exit Conference Date:** *01/29/2021*

Inspection Dates and Department Representative

01/29/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *8* **Residents Served:** *7*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *7* **Are 60 Years of Age or Older:** *3*
Diagnosed with Mental Illness: *7* **Diagnosed with Intellectual Disability:** *0*
Have Mobility Need: *0* **Have Physical Disability:** *0*

Inspections / Reviews

01/29/2021 Full

Lead Inspector: [REDACTED] **Follow-Up Type:** *POC Submission* **Follow-Up Date:** *04/18/2021*

Inspections / Reviews *(continued)*

4/19/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow Up Type: *Document Submission*

Follow-Up Date: *04/22/2021*

3c - Post Current License

1. Requirements

2600.

- 3.c. The personal care home shall post the current license, a copy of the current license inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

Description of Violation

The license inspection summary, dated 12/20/2019, was posted on a bulletin board but behind a locked glass, to the left of the main entrance, This is not a conspicuous and public place.

Plan of Correction

Accept

On 1/29/21, the cabinet in which the current Licensing Inspection Summary (LIS) and Emergency Operations Plans (EOP) are posted was unlocked. On 2/6/21, magnets were placed on the inside of the glass cabinets doors to allow access to the cabinet without locking the doors so that the LIS and EOP documents can be easily accessed by residents; proof of the magnets is found in Attachment A. To ensure ongoing compliance, the Program Administrator or designee) verifies that the LIS and EOP are present and easily accessible to residents and documents this review through the Daily Management Checklist.

Completion Date: 02/06/2021

25c1 - Personal Needs Allowance

1. Requirements

2600.

- 25.c. At a minimum, the contract must specify the following:
 - 1. Each resident shall retain, at a minimum, the current personal needs allowance as the resident's own funds for personal expenditure. A contract to the contrary is not valid. A personal needs allowance is the amount that a resident shall be permitted to keep for his personal use.

Description of Violation

Contracts for the following residents indicate the personal needs allowance retained monthly is \$60.00. The current personal needs allowance is \$85.00

- *Resident #1, contract dated [REDACTED]
- *Resident #2, contract dated [REDACTED]
- *Resident #3, contract dated [REDACTED]

25c1 - Personal Needs Allowance (*continued*)**Plan of Correction****Accept**

On [REDACTED] Resident #1, Resident #2 and Resident #3 resident contracts were updated to reflect the personal needs allowance amount of 85.00\$. Proof of the updated contract with signature is contained in Attachment B for Resident #2; Resident #1 and Resident #3 were not able to be counseled on the updated contracts as they've not returned back to this personal care home since the time of licensing ([REDACTED]) due to health issues and/or discharge. It should be noted that at the time of inspection it was founded that Resident #1, Resident #2 and Resident #3 were receiving the correct personal needs allowance amount of 85.00\$ despite the contract not reflecting the accurate amount. Through review of this violation it was founded that the resident contracts were being drafted from a template that contained incorrect information as it relates to the personal needs allowance. As a result, the template contract was discarded. [REDACTED] maintains a process in which the Program Administrator is responsible for completing and reviewing the resident contract with each resident for regulatory compliance prior to electronically filing the documents into the individual's electronic care record. On 4/16/2021, the Program Administrator was educated on the requirements of the resident contract, inclusive of, but not limited to the personal needs allowance being 85.00\$; proof of this training is contained in Attachment D.

Completion Date: 04/16/2021

123b - Emergency Procedures Posted

1. Requirements

2600.

123.b. Copies of the emergency procedures as specified in § 2600.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.

Description of Violation

The emergency procedures were locked behind glass on the bulletin board in the lobby. The second binder containing a copy of emergency procedures was in the medication room. Neither are in a conspicuous and public place in the home.

Plan of Correction**Accept**

On 1/29/21, the cabinet in which the current Licensing Inspection Summary (LIS) and Emergency Operations Plans (EOP) are posted was unlocked. On 2/6/21, magnets were placed on the inside of the glass cabinets doors to allow access to the cabinet without locking the doors so that the LIS and EOP documents can be easily accessed by residents; proof of the magnets is found in Attachment A. To ensure ongoing compliance, the Program Administrator or designee verifies that the LIS and EOP are present and easily accessible to residents and documents this review through the Daily Management Checklist.

Completion Date: 02/06/2021