

Department of Human Services  
Bureau of Human Service Licensing

September 14, 2022

[REDACTED]  
KEYSTONE SERVICE SYSTEMS INC  
4391 STURBRIDGE DRIVE  
HARRISBURG, PA, 17110

RE: KHS MENTAL HEALTH SERVICES-  
GARDNERS SCR  
221 OLD STATE ROAD  
GARDNERS, PA, 17324  
LICENSE/COC#: 31507

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/20/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
[REDACTED]

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: *KHS MENTAL HEALTH SERVICES-GARDNERS SCR* License #: *31507* License Expiration: *06/07/2023*  
Address: *221 OLD STATE ROAD, GARDNERS, PA 17324*  
County: *CUMBERLAND* Region: *CENTRAL*

**Administrator**

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

**Legal Entity**

Name: *KEYSTONE SERVICE SYSTEMS INC*  
Address: *4391 STURBRIDGE DRIVE, HARRISBURG, PA, 17110*  
Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-3 SP* Date: *08/18/1992* Issued By: *L & I*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *8* Waking Staff: *6*

**Inspection Information**

Type: *Full* Notice: *Unannounced* BHA Docket #: *0*  
Reason: *Renewal* Exit Conference Date: *07/20/2022*

**Inspection Dates and Department Representative**

07/20/2022 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

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

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *0*

**Number of Residents Who:**

Receive Supplemental Security Income: *8* Are 60 Years of Age or Older: *7*  
Diagnosed with Mental Illness: *8* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *0* Have Physical Disability: *0*

**Inspections / Reviews**

**07/20/2022 - Full**

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *08/05/2022*

**09/09/2022 - POC Submission**

Inspections / Reviews (*continued*)

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *09/15/2022*

09/14/2022 - Document Submission

Reviewer: [REDACTED] Follow-Up Type: *Not Required*

88a - Surfaces

1. Requirements

2600.

88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

On 07/20/22, the floor/carpet in the back stairway, leading from the second floor near the furnace room to the side of the house, had dirt and debris. The upstairs bathroom had an odor of urine and a sticky floor.

Plan of Correction

Accept

On, 07/20/2022, the floor in the back stairway was vacuumed and the upstairs bathroom was cleaned and rid of the urine smell. Keystone Service Systems, Inc. (Keystone) maintains a process in which program standards, including but not limited ensuring all rooms within the personal care home are clean and free of hazards, is to be formally assessed and monitored weekly through the use of the SCR Weekly Site Audit. Through review of the process, it was determined that the SCR Weekly Site Audit was not being completed and/or monitored to ensure compliance with physical site standards. As a result, on 9/6/2022 the Program Administrator retrained the Program Coordinator and program staff on the use of and monitoring of the SCR Weekly Site Audit. The Director will be responsible to ensure accuracy and completion of the SCR Weekly Site Audit through oversight of the SCR Weekly Site Audit completed by the Program Administrator (or Program Coordinator). Proof of this training is forthcoming.

Completion Date: 09/08/2022

Document Submission

Implemented

All Steps have been completed

185a - Implement Storage Procedures

1. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

On [redacted] belonging to Residents 1 and 2 were not calibrated with the correct date and time.

Plan of Correction

Accept

[redacted] Resident #1 and Resident #2's [redacted] were re-calibrated to reflect the correct date/time; proof of this re-calibration is found in Attachment #4a, 4b, and 4c.. Keystone Service Systems, Inc. (Keystone) has implemented a new process on 7/27/2022 wherein a monthly task has been established in Keystone's electronic task tracking record for each individual that uses a [redacted] that prompts staff to check the date/time of the [redacted] and re-calibrate if necessary. On 9/6/2022, the Program Administrator trained the staff on the re-calibration task; the content and proof of this training will be forthcoming. Additionally, proof of this newly implemented process for Resident #1 and Resident #2 are contained in Attachments #2a-b and #3a-b.

Completion Date: 09/08/2022

Document Submission

Implemented

All Steps have been completed. Please see new attachment.