

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

July 22, 2024

[REDACTED]
STAIRWAYS BEHAVIORAL HEALTH INC
[REDACTED]
[REDACTED]

RE: STAIRWAYS
810 WALNUT STREET
ERIE, PA, 16502
LICENSE/COC#: 40759

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/15/2024 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: STAIRWAYS License #: 40759 License Expiration: 06/14/2024
 Address: 810 WALNUT STREET, ERIE, PA 16502
 County: ERIE Region: WESTERN

Administrator

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

Legal Entity

Name: STAIRWAYS BEHAVIORAL HEALTH INC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 12/06/1996 Issued By: Dept L & I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 24 Waking Staff: 18

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Incident Exit Conference Date: 05/15/2024

Inspection Dates and Department Representative

05/15/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 27 Residents Served: 24

Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:

Hospice
 Current Residents: 0

Number of Residents Who:
 Receive Supplemental Security Income: 24 Are 60 Years of Age or Older: 13
 Diagnosed with Mental Illness: 24 Diagnosed with Intellectual Disability: 1
 Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

05/15/2024 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 05/27/2024

06/07/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 07/09/2024
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 06/14/2024

Inspections / Reviews (*continued*)

06/21/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: 07/09/2024

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: 07/07/2024

07/22/2024 - Document Submission

Submitted By: [REDACTED] Date Submitted: 07/09/2024

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

65f - Training Topics

1. Requirements

2600.

65.f. Training topics for the annual training for direct care staff persons shall include the following:

1. Medication self-administration training.
2. Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
3. Care for residents with dementia and cognitive impairments.
4. Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
5. Personal care service needs of the resident.
6. Safe management techniques.
7. Care for residents with mental illness or an intellectual disability, or both, if the population is served in the home.

Description of Violation

Staff person A did not receive training in the following topics during the 1/1/23 - 12/31/23 training year:

Medication self-administration training

Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan

Care for residents with dementia and cognitive impairments

Plan of Correction

Accept [REDACTED] 06/21/2024)

1. *Send an email to staff person A to coordinate Relias and face-to-face trainings. Owner: PCH Supervisor.*

Completion Date: 5/29/2024.

2. *Direct care staff A will complete training on:*

a. *Medication self-administration training*

b. *Meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan*

c. *Care for residents with dementia and cognitive impairments*

d. *Resident rights*

e. *The Older Adult Protective Services Act*

f. *Falls and accident prevention*

Owner: PCH Supervisor. Completion Date: 6/30/24.

3. *Train all other staff in the training list of item #2 that do not currently have them completed. Owner: PCH Supervisor. Completion Date: 10/31/2024*

4. *Add dates of completed trainings to staff annual training plans for 2024 as they are completed. The training plan will include the length of training and source. Owner: PCH Supervisor. Completion Date: 10/31/24*

5. *Send individualized sign-in sheets for each training to Human Resources to be added into the Relias system. Owner: PCH Supervisor. Completion Date: 10/31/24*

6. *Audit all staff training records to ensure all trainings are completed during the 2024 training year in accordance with 2600.5(f)(1-7). Any missing trainings will be completed immediately. Owner: PCH Supervisor.*

65f - Training Topics (continued)

Completion Date: 11/29/24.

7. Audit all staff training records to ensure that during the 2023 training year, all staff received training in all topics, in accordance with §2600.65(g)(1-6). Any missing trainings shall immediately be completed. Owner: PCH Supervisor. Completion Date: 6/30/24.

Licensee's Proposed Overall Completion Date: 11/29/2024

Implemented [redacted] - 07/22/2024)

65g - Annual Training Content

2. Requirements

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. Videos prepared by a fire safety expert are acceptable for the training if accompanied by an onsite 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.

Description of Violation

Staff person A did not receive training in the following topics during the 1/1/23 - 12/31/23 training year:

Resident rights

The Older Adult Protective Services Act (35 P.S. § § 10225.101—10225.5102)

Falls and accident prevention

Plan of Correction

Accept [redacted] 06/21/2024)

1. Send an email to staff person A to coordinate Relias and face-to-face trainings. Owner: PCH Supervisor. Completion Date: 5/29/2024.

2. Direct care staff A will complete training on:

- a. Medication self-administration training
- b. Meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan
- c. Care for residents with dementia and cognitive impairments
- d. Resident rights
- e. The Older Adult Protective Services Act
- f. Falls and accident prevention

Owner: PCH Supervisor. Completion Date: 6/30/24.

3. Train all other staff in the training list of item #2 that do not currently have them completed. Owner: PCH Supervisor. Completion Date: 10/31/2024

65g - Annual Training Content (continued)

4. Add dates of completed trainings to staff annual training plans for 2024 as they are completed. The training plan will include the length of training and source. Owner: PCH Supervisor. Completion Date: 10/31/24
5. Send individualized sign-in sheets for each training to Human Resources to be added into the Relias system. Owner: PCH Supervisor. Completion Date: 10/31/24
6. Audit all staff training records to ensure all trainings are completed during the 2024 training year in accordance with 2600.5(f)(1-7). Any missing trainings will be completed immediately. Owner: PCH Supervisor. Completion Date: 11/29/24.
7. Audit all staff training records to ensure that during the 2023 training year, all staff received training in all topics, in accordance with §2600.65(g)(1-6). Any missing trainings shall immediately be completed. Owner: PCH Supervisor. Completion Date: 6/30/24.

Licensee's Proposed Overall Completion Date: 11/29/2024

Implemented [REDACTED] - 07/22/2024)

65i - Training Record**3. Requirements**

2600.

65.i. A record of training including the staff person trained, date, source, content, length of each course and copies of any certificates received, shall be kept.

Description of Violation

The home's documentation of annual training completed by staff person A during the 1/1/23 - 12/31/23 training year does not include the length of training and source.

Plan of Correction

Directed [REDACTED] 06/21/2024)

1. Send an email to staff person A to coordinate Relias and face-to-face trainings. Owner: PCH Supervisor. Completion Date: 5/29/2024.
2. Direct care staff A will complete training on:
 - a. Medication self-administration training
 - b. Meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan
 - c. Care for residents with dementia and cognitive impairments
 - d. Resident rights
 - e. The Older Adult Protective Services Act
 - f. Falls and accident prevention

Owner: PCH Supervisor. Completion Date: 6/30/24.

3. Train all other staff in the training list of item #2 that do not currently have them completed. Owner: PCH Supervisor. Completion Date: 10/31/2024
4. Add dates of completed trainings to staff annual training plans for 2024 as they are completed. The training plan will include the length of training and source. Owner: PCH Supervisor. Completion Date: 10/31/24

65i - Training Record (continued)

5. *Send individualized sign-in sheets for each training to Human Resources to be added into the Relias system. Owner: PCH Supervisor. Completion Date: 10/31/24*

6. *Audit all staff training records to ensure all trainings are completed during the 2024 training year in accordance with 2600.5(f)(1-7). Any missing trainings will be completed immediately. Owner: PCH Supervisor. Completion Date: 11/29/24.*

7. *Audit all staff training records to ensure that during the 2023 training year, all staff received training in all topics, in accordance with §2600.65(g)(1-6). Any missing trainings shall immediately be completed. Owner: PCH Supervisor. Completion Date: 6/30/24.*

Proposed Overall Completion Date: 11/29/2024

Directed:

By 6/30/24, the administrator or designee will add the length of the training and source to staff person A's documentation of annual training completed during the 2023 training year.

■ **6/21/24**

Directed:

By 6/30/24, the administrator or designee will audit all 2023 staff training records to ensure they contain documentation of all required staff training in accordance with 2600.65(i). Training documentation will include: The staff person trained, date, source, content, length of each course and copies of any certificates. Any missing documentation will immediately be recorded/located and added to the staff record. Documentation of the audits will be kept.

■ **6/21/24**

Directed Completion Date: 11/29/2024

Implemented ■ - 07/22/2024)