

FEB 1 7 2015

Mr. Earl Hill, Director Allegheny County Executive 7150 Highland Drive Pittsburgh, Pennsylvania 15206

RE:

Shuman Center

License #: 414310

Dear Mr. Hill:

As a result of the Department of Human Services' licensing inspection on August 27, 2014, August 28, 2014, August 29, 2014, September 12, 2014, October 6, 2014, October 7, 2014 and October 15, 2014 of the above facility, the violations with 55 Pa.Code Ch. 3800 (relating to Child Residential and Day Treatment Facilities) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 3800 must be maintained.

Your regular license for the period October 4, 2014 to October 4, 2015 was issued on July 2, 2014. Your regular license remains in good standing.

Sincerely,

Matthew J. Jones

Matthew J Foney me

Director

Enclosure
Licensing Inspection Summary

VIOLATION REPORT CHILD RESIDENTIAL LICENSING - 55 Pa.Code Chapter 3800

Facility Name: SHUMAN CENTER		License Number: 41431	
Address: 7150 HIGHLAND DRIVE, PITTSBURGH, PA 15206		County: Allegheny	
Director: Earl Hill		Region: WEST	
Legal Entity Name: ALLEGHENY COUNTY EXECUTIVE			
Legal Entity Address: 7150 HIGHLAND DRIVE, PITTSBURG	H, PA 15206		
Certificate(s) of Occupancy Other 12/12/1974 City Of Pittsburgh			
Program Type: Licensed Secure Detention 120	d Capacity:	Number of Children Served: 60	
Type of Inspection: Full BHA Dock	et Number:	Notice: Announced	
Reason(s) for Inspection(s) Renewal, Incident			
On-Site Inspections Dates and Department Representatives On-Site 08/27/2014: Joyce, Kylee; Mundy, Olivia 08/28/2014: Joyce, Kylee; Mundy, Olivia 08/29/2014: Joyce, Kylee; Mundy, Olivia 09/12/2014: Joyce, Kylee; Pugh, Bridget Off-Site Inspection Dates and Inspectors, if Applicable			
Other Details	, , , , , , , , , , , , , , , , , , , 		
Partial or Full Triggers:	Secretary to the secret		
Child Demograph	hic Data as of Inspect	ion Dates	
Age of Children:	Number of C	hildren who:	
0 to 5 years: 0	Are Adjudic	ated Delinquent: 60	
6 to 13 years: 3	Are Depend	•	
14 to 17 years: 43		I lliness: 10	
18 to 21 years: 14	İ	ellectual Disability: 0	
	Have a Phys	sical Disability: 0	
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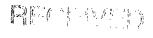
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Licensing Inspection Summary: 41431 - 08/27/2014 - Joyce, Kyle Facility Name: SHUMAN CENTER	WEST RECION FIELD OFFICE Human Services Licensing	
1. REGULATION 55 Ps.Cade \$3800 3800.32(f) - A child shall have the right to visit with family at le the family, the child and the facility, unless visits are restricted family visits.	east once every 2 weeks, at a time and location convenient for I by court order. This right does not restrict more frequent	
2a. DEBCRIPTION OF VIOLATION The facility's Visitor Security Policy Indicated the following: "Children under the age of 10 are not permitted access to the build!	лg."	
The facility's policy restricts the right to visit with family as described	i in this regulation.	
 PLAN OF CORRECTION (POQ) (Attent pages as necessary. Remainable steps to correct the violation described above and steps to prave immediately, include dates by which the steps will be completed. 	mber that you must sign and date any eitached pages.) Int a similar violation from occurring again. If steps cannot be completed	
We have revised our visitation policy to include children, parents, guardians, so finalidents. Every resident is attorted the opportunity to meet with family in whather on the unit, or in the rotunds. Special visitation agreements for differ the enranged through the Social Service Department. This policy was revised	s confidential setting, entiday entifor times can	
All Unit Chiefs and Supervisors shall be notified in regard to the revised Visita memo and monthly supervisory conferences.	lion Policy by October 31, 2014 via	
	•	
	\$ 4.00 miles	
Repeat Violation: No Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page) Earl 7 (LLP)		
Printed Name and Title of Legal Entity Representative (Required on EYERY Page) Sar J. F. H. J. D.	rector Date 10/9/14	
DEPARTMENT USE ONLY - FACILITIES MAY NOT WRITE BELOW THIS LINE!		
The above plan of correction is approved as of \(\frac{10/15/14}{\text{(Date)}}\)	Plan of correction implementation status as of 10/15/19	
	Fully Implemented (Date)	
<i>II</i>	Pertially implemented - Adequate Progress	
The above plan of correction was approved by (Initials)	Partially implemented - Inadequate Progress Not Implemented	

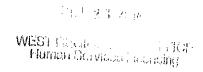
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Ucenaing inspection Sur	nmary; 41431 - 08/27/2014 - Joyce, K	(yiee WEST PERSON TRAD OFFICE Page 3 of Human Services Licensing
Facility Name: SHUMAN (1 turner
1. REGULATION 65 Pa.Co 3800.32(i) - A child has t selzure procedures, subj	de §3800 he right to be protected from unrea ect to reasonable facility policy.	asonable search and seizure. A facility may conduct search and
Residents are to be All residents received A fully dothed pata A strip search is an area.	ontrol policy indicates the following: e searched every time they leave their we a thorough pet down before enterin- down search is conducted every time	ng their room at bedtime a resident enters the unit i return after resident has left the facility for any other severe
3. PLAN OF CORRECTION	(POC) (Attach pages as necessary, Ren	nember that you must sign and date any attached pages.) event a similar violation from operating again. If steps cannot be completed
Regulation 55 Pe Code 38 3800,32 (i)	00	
Right to be protected from	unreasonable search	
	al is to aubmit a policy with the language and	our existing search policies of routine and non routine procedures that is ecceptable to the Department of Public Welfare
	ntraband Control policy indicated residents w cy because it had not been occurring.	ere searched every time they entered or left their rooms has
Policy statement #2 All residents receive a thor occurring	ough pat down search before entering their ri	pom at bedume has also been deleted because it had not been
information provided by oil		e examining lectors such as: information provided by staff, provided by the resident, the experience of staff with the resident, in center.
provided by others, the act Alf searches are conducted Youth Care Workers Male Female residents strip dow	ducted after family and special visits, resident livity of the resident, information provided by if In a manner that protects the dignity of the n residents are required to remove all clothing	,
See pages	3A, 3B, 3C	
Repeat Violation: No	Date(s) of Previous Violation(s):	
Signature of Legal Entity R (Required on SVERY Page	epresentative	
Printed Name and Title of I Required on EVERY Page	egal Entity Representative	Date 10/23/14
DEPART	MENT USE ONLY - FACILITIE	S MAY NOT WRITE BELOW THIS LINE!
The above plan of correction		Plan of correction implementation status as of 19/29/19
		Fully Implemented (Date)
The above plan of correction was approved by Partially Implemented - Adequate Progress Partially Implemented - Indonvets Decreased		
THE BOOVE PIRE OF COLLECTION	(Initials)	Partially implemented - Inadequate Progress Not implemented



Regulation 55 Pa Code 3800 3800.32 (i)



Right to be protected from unreasonable search

On October 8, 2014, we requested a waiver for an extension to review our existing search policies of routine and non routine personal searches. Our goal is to submit a policy with the language and procedures that is acceptable to the Department of Public Welfare and Shuman Detention Center.

Policy statement #1

The facility's Centering Contraband Control policy indicated residents were searched every time they entered or left their rooms has been deleted from the policy because it had not been occurring.

Policy statement #2

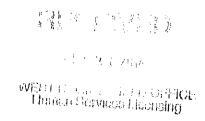
All residents receive a thorough pat down search before entering their room at bedtime has also been deleted because it had not been occurring.

Policy statement #3

A fully clothed pat-down search may be conducted based on reasonable examining factors such as: information provided by staff, information provided by others, the activity of the resident, information provided by the resident, the experience of staff with the resident, and the need to verify compliance with the policies of Shuman Detention Center.

Policy statement #4 and #5

A strip search may be conducted after family and special visits, residents shall be subject to strip searches, based on information provided by others, the activity of the resident, information provided by the resident, and the experience of the staff with the resident. All searches are conducted in a manner that protects the dignity of the residents and are conducted only by same sex Youth Care Workers. Male residents are required to remove all clothing with the exception of underwear. Female residents strip down to panties and bra. Residents being searched are the only resident present when searches are being conducted.



Listed below is a chronology of where we are with this policy:

+ September 12, 2014 - received citations from the Department of Public Welfare.
+ September 15, 2014 - discussed citations with County Manager, Mr. We discussed our response to the reasonable search citation. County Attorney, Mr. was emailed the citation to assist with developing an appropriate response.
+ September 16, 2014 - Contacted Mr Executive Director, JDCAP to discuss citation and obtain information from other detention centers regarding their search and seizure policy. Teleconference scheduled for September 17, 2017 at 8:00 am.
+September 17, 2014 – Teleconference- Directors discussed their search and seizure policies. Director forwarded search and seizure policies to Mr. Bear for review with his attorney. Mr. was to schedule meeting with the Department of Public Welfare officials in Harrisburg regarding this issue.
+ September 22, 2014 - Met with Mr. Jr. County Attorney, recently assigned to Shuman Center. We discussed our recent search and seizure policy citation. Mr. was emailed search and seizure policy and DPW's regulations on search and seizure regulations for review and response. The Director of Shuman Center working on drafting Search and Seizure Policy.
+ October 2, 2014 – Teleconference with Mr. Licensing Manager, Department of Public Welfare, Ms. Regulatory Technician, Department of Public Welfare, and Ms. Deputy Director, Shuman Detention Center to review and discuss citations and plan for corrections.
+ October 7, 2014 – Filled out request for waiver of regulation.
+ October 8, 2014 - Consulted with County Attorney Mr. Jr. regarding language.
+ October 8, 2014 - Sent letter To Bureau of Licensing requesting waiver of regulation.
All Shuman Center staff shall receive updated training on the Search and Seizure Policy to:

- Conduct search and seizure procedures in a manner that protects the dignity of the resident and shows respect for their property.
- Ensure that fully clothed pat-down searches, unclothed searches, are conducted only by same sex Youth Care workers.
- Never touch a resident as part of performing an unclothed search.
- Conduct all unclothed searches in the admission area bathroom.

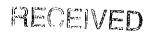
- Ensure that unclothed searches are witnessed by same sex Youth Care Workers or if the witness is not of the same sex then the witness must only be able to see the Youth Care Worker conducting the search and the privacy curtain screens the resident from the view of the witness and others.
- Ensure that the resident being searched is the only resident present in the bathroom area where an unclothed searches in being conducted.
- All Shuman Center staff shall be trained on current policies and procedures by November 28, 2014.

Earl 7 Hill 10/23/14

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WEST TRANSPORT REPORTION Thuran Corvices Licensing



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		WEST REGION FIELD OFFICE Page 4 of 7
Licensing inspection Summary: 41431 - 08/27/2014 Facility Name: SHUMAN CENTER	- Joyce, Ky	Human Services Licensing
REGULATION 55 Pa,Code §3800 S800.51 - Child abuse and criminal history checks (relating to the Child Protective Services Law) and	shall be c Chapter (complated in accordance with 23 Pa.C.S. § § 6301-6385 3490 (relating to protective services).
2a. DESCRIPTION OF VIOLATION Staff Person A, hired 3/6/06, did not have a valid Penns	sylvenia ori:	minal history check.
Staff Person B, hired 8/13/07, did not have a valid Peni		
Staff Person C, hired 1/14/08, did not have a valid Pen		_
3. PLAN OF CORRECTION (POC) (Altech pages as neces	issery. Rem	
#3 Plan os Correction Three (3) Chiki Care Worker personn our inspection did not have the required PA criminal backgrou	ei files that w and checks or	vare selected for review during n file.
Regulation #6 PA Code 3800 51 Child Abuse and Criminal His	story Checks	must be mainteined on file.
The employees with missing classences were obtained (see A background classences indicated a record was on file were re- offenses prohibiting employment within a child reaidential facil	viewed and d	Those staff persons whose PA determined not to be any
Corrective Action - Shuman Juvenile Detention Contex's hiring employment candidates be informed during the hiring process for and obtained prior to any employment orientation being so	that backgro	ree all prospective ound clearances must be paid
Sterting in September 2013, the administration ensures backg prior to employment in the following 3 grass; PA child Abuse of Clearence (STO-164) and Fingerprints. If a prospective cand must be active within the past 12 months. The background of information that must be submitted to the Allegheny County H hiring or orientation of staff can occur.	Clearance (C' date elready recks are a p	Y-113), PA Criminal History has any of the clearances. It eart of the application packet of
Shuman Center is in the process of raviewing all staff personner proper child abuse clearance or PA criminal background chec clearance immediately and remove from working directly with robtstined. Starting in January 2015. Shuman Center will trialit background check not more than 38 months old. All staff iden clearence will be notified and required to obtain updated clear relimbursed to the employees upon receipt of documentation of	k clearance v residents unti tuté a policy r titled as nece ances at their	will be required to obtain their if their clearances are majorities that their staff haves valid along all staff haves valid along all updated background frown expense which will be
All employees whose background checks indicate that a recorsobral documentation relating to the review. Shuman Genter identified will be reviewed and evaluated against our DPW registeries from amployment to a child residential facility are no	rd is under re Will ensure is Julistons to er	wiew will be required to
, V.ZW485 - \$452 - V.P		
Repeat Violation: No Date(a) of Previous Viole	ation(s):	
Signature of Legal Entity Representative (Required on EVERY Page) Soul 7. /	ép	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Sort F. Hil	'a 	Date / 0/9//4
DEPARTMENT USE ONLY - F	ACILITIE	S MAY NOT WRITE BELOW THIS LINE!
The above plan of correction is approved as of 12	<u>/ 39 //4</u> (Date)	Plan of correction implementation status as of [2/29/19
		Fully Implemented
Thousand the second sec	11	Partially Implemented - Adequate Progress
The above plan of correction was approved by (Initials)	Pertially Implemented - Inadequate Progress Not Implemented



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	WEST REGION FIELD OFFICE Page 5 of 7		
Licensing inspection Summery: 41431 - 08/27/2014 - Joyce, Kyle Facility Name: SHIJMAN CENTER	Human Services Licensing		
1. REGULATION 58 Pa.Code §3800 3800.58(b) - Prior to working alone with children and within 12 full-time, part-time and temporary staff person who will have not least 30 hours of training to include at least the following are (1). The requirements of this chapter. (2) 23 Pa.C.S. § § 6301-6385 (relating to child protective services). (3) Fire safety. (4) First aid, Heimlich techniques, cardiopulmonary resuscing Crisis intervention, behavior management and suicide personal services.	agular and significant direct contact with children, shall have reas: services law) and Chapter 3490 (relating to protective tation and universal precautions.		
2a. DESCRIPTION OF VIOLATION Steff person D, the Director, was hired on 12/3/13 and has not recei	ivad suicide prevention training.		
 PLAN OF CORRECTION (POC) (Attech pages as necessary. Remen Include sleps to correct the violation described above and steps to preve- immediately, include dates by which the steps will be completed. 	nber that you must sign and date any attached pages.) of a similar violation from occurring again. If steps cannot be completed		
Effective immediately all new hire will receive a minimum of 40 hours of orient being sestigned to working independently; the orientation will include but is not First Aid, Heimlich Technique & CPR, Child Protective Service Laws. Cns s in Management, Suloide Proyenson, Health and other special issues.	t limited to Fire Safety.		
The Training Manager will review and maintain all training files to ensure that all training has been completed before employees are assigned to working independently with residents. This training will be completed within 10 days of being hind. In addition the Training Manager will monthly review files of all employees to ensure that the training requirements have been achieved.			
On September 24, 2014, the director completed an eig provide initial assistance to young people experiencing prevention, depression, anxiety, psychosis, and substa	g mental health problems including suicide		
Repeat Violation: No Date(s) of Previous Violation(s):			
Signature of Legal Entity Representative IRequired on EVERY Pagel Earl T. Hill			
Printed Name and Title of Legal Entity Representative IRequired on EVERY Page)	Date 10/9/14		
DEPARTMENT USE ONLY - FACILITIES	MAY NOT WRITE BELOW THIS LINE!		
The above plan of correction is approved as of 10 /15 /14 (Date)	Plan of correction implementation status as of 10/15/19		
The above plan of correction was approved by (Initials)	Fully Implemented Partially Implemented - Adequate Progress Partially Implemented - Inadequate Progress Not Implemented		



901 09 2014

Least me Ingreatile. It.	WEST REGION FIELD OFFICE Page 6 of 7 Human Services Licensing
Licensing inspection Summary: 41431 - 08/27/2014 - Joyce, Kylee Facility Name: SHUMAN CENTER	Haman Services Licensing
REGULATION 55 Ps.Code §3800 3800.132(c) - A written fire drill record shall be kept of the date, to route used, the number of children in the facility at the time of the smoke detector was operative.	me, the amount of time it took for evacuation, the exit drill, problems encountered and whether the fire alarm or
2a. DESCRIPTION OF VIOLATION The facility's fire drill record for 1/4/14 and 3/27/14 did not indicate am of	r pm.
 PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember Include steps to correct the violation described above and steps to prevent a immediately, include dates by which the steps will be completed. 	that you must sign and date any attached pages.) similar violation from occurring again. It steps cannot be completed
The Fire Onli Report Sheet was redone to appropriately reflect the time, date, the time it took for evacuation, the extiroute used, the number of resident at the fact of the drill, any problems encountered and whether the fire atom or smoke detect working. Residents and stelf are to practice alternative routes and different safe at The Security Manager shall ensure the monthly form is completed in accordance upolicy and OPW regulations.	y at the time are were reas to meet
This policy was reviewed with Security Manager on September 5, 2014 to discuss procedures. Outlined was steps taken for a fire drill. Security Manager, per policy the fire drill schedule and reviews with upcoming shift supervisors 1-2 weeks prior the day of the drill, if the Security manager is in the building, he maintains overspit place filling in whom needed. If the Security Manager is not in the building at the fire aviews the documentation after the fact and checks the booth log to make sur was taken off time. If an incident occurred during the fire drill, a video review will be	, maintains to drill. On หั of the drill, ne of the ddnill, e the system
Repeat Violation: No Date(s) of Previous Violation(s):	
Required on EVERY Penel Par Q 7 /L Q D	
Printed Name and Title of Logal Entity Representative Required on EVERY Page) Egy F. Hill	Date 10/9/14
DEPARTMENT USE ONLY - FACILITIES MA	Y NOT WRITE BELOW THIS LINE!
The above plan of correction is approved as of 12/29/14 (Date)	Plan of correction Implementation status as of 12/29/19
The above plan of correction was approved by (Initials)	Fully Implemented Partially Implemented - Adaquate Progress Portlaily Implemented - Inadequate Progress Not Implemented



HOT 09 2018

Licensing inspection Summary: 41431 - 08/27/2014 - Joyce, Kylee Facility Name: SHUMAN CENTER	VEST REGION FIELD OFFICE Page 7
1. REGULATION 55 Pa.Code 93800 3800, 162(b) - Additional portions of meals shall be available for the ci	nlidran,
la. DESCRIPTION OF VIOLATION Additional portions are routinely unavailable to residents during breakfast.	
PLAN OF CORRECTION (POO) (Attach pages as necessity. Remember that y include steps to correct the violation described above and steps to prevent a climital immediately, include dates by which the steps will be completed.	tou mass sign and date any ottoched pages.) I violation from occurring again. If stops cannot be completed
Plan of Correction: Shuman Juven le Dejention Center's support the health and well-be regaldents by promoting good eating habits. Resident meals are served thomugh the Natio Breakfast and Lunch Programs. Meals must meet a min mum nutritional requirements esticat, state and federal staties and regulations. Each meal must consist of at least 6 van fruits and vegetables daily and others five (6) different fruits vegetables over the course of	g of aur and Schoel tablehed by
Corrective Action - Starting in September 1, 2014 our newly contracted Food Service Provider menu and options for seconds and alternates (substitutes made available to staff and due to distant restrictions). Seconds and alternates are made available for all meats service four (4) oz. of applessues is being made available daily as seconds for breakfast. Second Identified on our menu board food serving line.	1 residente
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eat Violation: No Date(s) of Previous Violation(e):	
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ed Name and Title of Legal Entity Representative pired on EVERY Page)	Oate 10 /9 /14
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"" TO THE PROPERTY OF A STANDARD BY A TO THE TOTAL STANDARD BY A T	correction implementation status as of 10/15/19
⊠ Ful	ly Implemented (Date) 7

VIOLATION REPORT CHILD RESIDENTIAL LICENSING - 55 Pa.Code Chapter 3800

Facility Name: SHUMAN CENTER		License Number: 41431	
Address: 7150 HIGHLAND DRIVE, PITTSBURGH, PA 15206		County: Allegheny	
Director: Earl Hill		Region: WEST	
Legal Entity Name: ALLEGHENY COUNTY EXECUTIVE			
Legal Entity Address: 7150 HIGHLAND DRIVE, PITTSBURGH,	PA 15206		
Certificate(s) of Occupancy	MARIA MARIANTA		
Program Type: Licensed C Secure Detention 120	apacity: Numbe	er of Children Served:	
Type of Inspection: Partial BHA Docket	Number: Notice:	Unannounced	
Reason(s) for Inspection(s)			
Incident, Monitoring	0.02		
On-Site Inspections Dates and Department Representative 10/06/2014: Joyce, Kylee; Dinardo, Anna	s On-Site		
10/07/2014: Joyce, Kylee; Dinardo, Anna			
10/15/2014: Joyce, Kylee; Mundy, Olivia			
Off-Site Inspection Dates and Inspectors, if Applicable			
10/07/2014; Joyce, Kylee; Dinardo, Anna; Kasmarik, Sarah; F	^p ugh, Bridget		
Other Details			
Partial or Full Triggers: Random Indicators:			
Child Demographic Data as of Inspection Dates			
Age of Children:	Number of Children who:		
0 to 5 years: 0	Are Adjudicated Delinquent: 41		
6 to 13 years: 4	Are Dependent; 0		
14 to 17 years: 23	Have Mental Illness: 12		
18 to 21 years: 14	Have an Intellectual Disability: 0		
	Have a Physical Disability: 0		

Not implemented