

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to MON-YOUGH COMMUNITY SERVICES, INC.
LEGAL ENTITY

To operate MON-YOUGH COMMUNITY SERVICES
NAME OF FACILITY OR AGENCY

Located at 624 LYSLE BLVD., MCKEESPORT, PA 15132
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE _____ ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE _____ ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE _____ ADDRESS OF SATELLITE SITE

To provide Personal Care Homes
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 45
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.
(MAXIMUM CAPACITY)

Restrictions: _____

This certificate is granted in accordance with the Public Welfare Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from June 15, 2010 until June 15, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 430030

Robert E. Robinson

ISSUING OFFICER

Kevin T. Casey

DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable
and should be posted in a conspicuous place in the facility.

PW 628 - 4/02



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
PO BOX 2675
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

JUN 16 2010

PHONE: (717) 783-3670
FAX: (717) 783-5662

Ms. Noreen Fredrick, Executive Director
Mon-Yough Community Services, Inc.
Attn: Chris Zeolefrow
500 Walnut Street
McKeesport, Pennsylvania 15132

RE: Mon-Yough Community Services
625 Lysle Boulevard
McKeesport, Pennsylvania 15132

Dear Ms. Fredrick:

As a result of the Department of Public Welfare's licensing inspection on May 24, 2010 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

Sincerely,


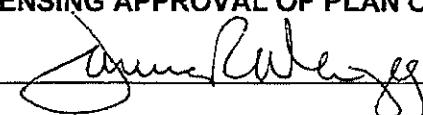
A handwritten signature in cursive script that reads "Kevin T. Casey".

Kevin T. Casey
Deputy Secretary

Enclosures
License
Violation Report

Western Region


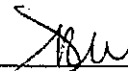
VIOLATION REPORT PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME Mon-Yough Community Services 624 Lysie Blvd., McKeesport, PA 15132		Adult Residential Licensing 430030	CURRENT LICENSE NUMBER
INSPECTION DATE(S) (Include all dates of the inspection) May 24, 2010		REGIONAL REPRESENTATIVE C. Goedert, L. Knockstead	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) Christine Hagan-Zellefrow, Manager of MH Residential Services, PCH Administrator			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE  Christine Hagan-Zellefrow	DATE 6/4/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 6/8/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
103f Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers shall be required in refrigerators and freezers.	The first freezer to the left of the refrigerator in the kitchen was 30 degrees Fahrenheit.	6/4/10	The freezer has been fixed and the temperature is at zero degrees. The kitchen staff will keep a chart of the temperature of that freezer for the next month to ensure that the temperature stays at zero degrees or below. The Administrator will do checks on the freezer as well to ensure compliance. Any issues with this freezer will be addressed immediately.	

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600



Western Region

NAME AND ADDRESS OF PERSONAL CARE HOME Mon-Yough Community Services 624 Lysle Blvd., McKeesport, PA 15132		CURRENT LICENSE NUMBER 430030	
INSPECTION DATE(S) (Include all dates of the inspection) May 24, 2010		REGIONAL REPRESENTATIVE C. Goedert, L. Knockstead	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 		DATE 6/4/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 
			DATE 6/8/10

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144c-2 The location of a smoking room or outside smoking area shall be a safe distance from heat sources, hot water heaters, combustible or flammable materials and away from common walkways and exits.	There was a full propane tank on the grill in the smoking area adjacent to the first floor. REPEAT VIOLATION 03/04/09	5/24/10	The propane tank was removed immediately from the area. It is being stored in an area away from the residents smoking area. The staff will monitor this by checking the area on a daily basis and documentation of these checks will be recorded on the shift daily checklist. The program supervisor will reapprove the checklist and do visual walk-throughs of the smoking area to ensure compliance. Staff and residents will be educated on fire danger of grill's propane tank near smoking area. saw 6/8/10	Steps have been taken to correct violation; full compliance is not verifiable 6/8/10 gmw Date Initials (DPW)

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600


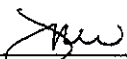
Western Region

NAME AND ADDRESS OF PERSONAL CARE HOME Mon-Yough Community Services 624 Lysle Blvd., McKeesport, PA 15132		CURRENT LICENSE NUMBER Adult Residential Licensing 430030	
INSPECTION DATE(S) (Include all dates of the inspection) May 24, 2010		REGIONAL REPRESENTATIVE C. Goedert, L. Knockstead	
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225c The resident shall have additional assessments as follows: (1) Annually. (2) If the condition of the resident significantly changes prior to the annual assessment. (3) At the request of the Department upon cause to believe that an update is required.	The following resident's assessments did not include all of their diagnoses: <ul style="list-style-type: none"> • Resident #1's assessment dated 08/11/10. • Resident #2's assessment dated 10/18/09. • Resident #3's assessment dated 04/20/10. 	6/3/10	The diagnoses for these three residents have been added to their Assessments. The assessments have been reviewed for all of the residents to ensure that the medical diagnoses are consistent throughout all the assessments. The Program Supervisors/ Administrators will review the support plans and assessments upon completion and will complete quarterly chart audits to ensure compliance. Documentation of chart audits will be kept. jm 6/8/10	jm 6/8/10

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

Western Region

NAME AND ADDRESS OF PERSONAL CARE HOME Mon-Yough Community Services 624 Lysle Blvd., McKeesport, PA 15132		CURRENT LICENSE NUMBER Adult Residential License # 40030		
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227d Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services.	Resident #4's most recent support plan dated 10/09/09 did not include the need for the staff to monitor the resident's food intake, to observe the resident during and after meal periods, or to check the resident's weight.	6/3/10	Resident #4's Support Plan was updated to include the information cited on the violation column of this report. The Program Supervisor will continue to monitor resident #4's progress and make updates as needed to the support plan. All Support Plans will be reviewed by the Program Supervisor/Administrator upon completion and will be audited on a monthly basis to ensure that all current information is recorded on the support plan. Documentation of monthly review will be kept. JW 6/8/10	JW 6/8/10