COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to **MERCY BEHAVIORAL HEALTH**
(LEGAL ENTITY)

To operate **MUNHALL MANOR**
(NAME OF FACILITY OR AGENCY)

Located at **2514 MAIN STREET, MUNHALL, PA 15120**
(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 **17** (MAXIMUM CAPACITY)
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

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 **July 6, 2012** until **July 6, 2013**,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 434730

Robert E. Robinson
ISSUING OFFICER

DIRECTOR

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 – 01/11

pennsylvania
DEPARTMENT OF PUBLIC WELFARE

AUG 09 2012

Mr. Raymond L. Wolfe, Executive Director
Mercy Behavioral Health
Attn: Anne Spontak
1200 Reedsdale Street
Pittsburgh, Pennsylvania 15233

RE: Munhall Manor
2514 Main Street
Munhall, Pennsylvania 15120

Dear Mr. Wolfe:

As a result of the Department of Public Welfare's licensing inspection on July 6, 2012 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,

Ronald Melusky
Director

Enclosures
License
Violation Report

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

RECEIVED
JUL 27 2012
Western Field Office
Adult Residential Licensing

PCH Name: MUNHALL MANOR	License Number: 434730
Address: 2514 MAIN STREET, MUNHALL, PA 15120	County: Allegheny
Administrator: Michael Budai	Region: WEST
Legal Entity Name: MERCY BEHAVIORAL HEALTH	
Legal Entity Address: 1200 REEDSDALE STREET, PITTSBURGH, PA 15233	

Certificate(s) of Occupancy
R-4
05/15/2008
L&I

Staffing Hours
Resident Support: 8 | Total Daily Staff: 16 | Waking Staff: 12

Type of Inspection: Full | BHA Docket Number: N/A | Notice: Unannounced

Reason(s) for Inspection(s)
Renewal

On-Site Inspections Dates and Department Representatives On-Site
07/06/2012: Ropon, Dennis; Mandock, Nancy

Off-Site Inspection Dates and Inspectors, if Applicable

Other Details
Partial or Full Triggers: N/A | Random Indicators: N/A

Resident Demographic Data as of Inspection Dates

Licensed Capacity: 17

Number of Residents Served: 8

Secured Dementia Care Unit in Home: No

Area:

Secured Dementia Unit Capacity, if Applicable:

[redacted]

Number of Residents who:

[redacted]

RECEIVED
JUL 27 2012
Western Field Office
Adult Residential Licensing

1. REGULATION 55 Pa.Code §2600
2600.66(a) - A staff training plan shall be developed annually.

2a. DESCRIPTION OF VIOLATION
The home does not have a staff training plan for the 7/1/11 through 6/30/12 or the 7/1/2012 through 6/30/13 training years.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

ATTACHED ARE COPIES OF MUNHALLS 2012 & 2013 TRAINING SCHEDULES. AT THE TIME OF AUDIT, MUNHALL'S TRAINING COORDINATOR HAD NOT COMPLETED THE TRAINING SCHEDULE FOR JULY 1, 2012 THROUGH JUNE 30, 2013. THE DELAY OCCURRED DUE TO A LACK OF RESPONSE FROM A FIRE PROTECTION INSPECTOR, NEEDED TO ACCURATELY COMPLETE THE SCHEDULE FOR THE YEAR. IN RESPONSE TO THIS VIOLATION, MUNHALL PCHA (ALONG WITH OTHER MERCY PCHA'S & OUR TRAINING COORDINATOR) ARE LOOKING AT POTENTIAL BACK-UP FIRE INSTRUCTORS & ALTERNATIVE METHODS (APPROVED VIDEOS, READING MATERIAL & OTHER AGENCIES) TO INSURE THERE IS NO FUTURE DELAY IN CREATION OF ANNUAL TRAINING LOGS. AN NBC APPROVED ON-LINE TRAINING IS AVAILABLE THROUGH MERCYS ON-LINE TRAINING & HAS BEEN ASSIGNED TO ALL STAFF SHOULD SOMEONE NOT BE ABLE TO ATTEND IN-CLASS.

8-20-12 The Administrator or designated staff person will review the home annual staff training plan to ensure the training plan is in accordance with regulation 2600.66 b and that the proper staff complete the required training in accordance with regulations 2600.65 A and 2600.65 g. 7-27-12

Repeat Violation: No	Date(s) of Previous Violation(s):			

Signature of Legal Entity Representative (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)
MIKE BUDAI, PCHA

Date 7/25/12

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 7-27-12 (Date)

The above plan of correction was approved by _____ (Initials)

Plan of correction implementation status as of 7-27-12 (Date)

- ☐ Fully Implemented
- ☑ Partially Implemented - Adequate Progress 7-27-12
- ☐ Partially Implemented - Inadequate Progress
- ☐ Not Implemented

Violation Report: 43473 - 07/06/2012 - Ropon, Dennis
PCH Name: MUNHALL MANOR

JUL 27 2012
Western Field Office
Adult Residential Licensing

1. REGULATION 55 Pa.Code §2600

2600.132(b) - A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.

2a. DESCRIPTION OF VIOLATION

The home has not had an observed fire drill or a fire safety inspection conducted by a fire safety expert within the past year.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

MUNHALL MANOR HAD THEIR ANNUAL DRILL CONDUCTED ON 4/25/12 BY [redacted], MUNHALL VFD CHIEF (SEE ATTACHED.) [redacted] HOWEVER DID NOT CLARIFY AS TO WHETHER OR NOT A SAFETY INSPECTION WAS COMPLETED AT THE TIME OF THE DRILL OBSERVATION. LICENSING REPRESENTATIVES GAVE US A COPY OF THE NEWLY CREATED 'SUPERVISED FIRE DRILL & FIRE SAFETY INSPECTION" FORM AT THE TIME OF AUDIT. THIS FORM SHOULD ELIMINATE ANY CHANCE OF DISREGARDED INFORMATION AT FUTURE DRILL OBSERVATIONS. COPIES OF THIS FORM HAVE BEEN GIVEN TO THE OTHER MERCY PCHA'S IN ORDER TO INSURE COMPLIANCE AT ALL SITES. COPIES HAVE ALSO BEEN GIVEN TO THE MUNHALL VFD TO ASSIST THEM BOTH IN FUTURE OBSERVATIONS AT OUR SITE & OTHER PCH'S THEY COMPLETE OBSERVATIONS AT.

8-20-12 - The Administrator or designated staff person will obtain the proper documentation for the home's 2012 fire inspection and fire drill conducted by the fire safety expert. The documentation will be kept in the home. - 7-27-12

Repeat Violation: Yes	Date(s) of Previous Violation(s):	05/23/2011		

Signature of Legal Entity Representative (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative (Required on EVERY Page): MIKE BUDAJ, PCHA

Date 7/25/12

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Violation Report: 43473 - 07/06/2012 - Ropon, Dennis
PCH Name: MUNHALL MANOR

JUL 27 2012

Western Field Office
Adult Residential Licensing

1. REGULATION 55 Pa.Code §2600

2600.171(b)(5) - If staff persons or volunteers of the home provide transportation for the residents, the vehicle must have a first aid kit with the contents in § 2600.96 (relating to first aid kit).

2a. DESCRIPTION OF VIOLATION

The home uses a Ford van to transport residents. The first aid kit in the van does not have a thermometer.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

AS SUGGESTED BY THE LICENSING REPRESENTATIVE AT THE TIME OF AUDIT, MUNHALL HAS "PAPER TAPED" ALL OF OUR FIRST AID KITS. PAPER TAPE HAS BEEN LIGHTLY PLACED OVER THE LIDS TO EACH FIRST AID KIT, LEAVING THEM EXTREMELY EASY TO OPEN. A NOTE HAS BEEN ATTACHED INFORMING STAFF TO ALERT MUNHALL'S NURSE IF ANY CONTENTS HAVE BEEN USED (SO THEY MAY BE REPLACED.) IN ADDITION, THE COUNSELOR IN CHARGE OF VAN MAINTENANCE WILL CHECK THE KITS MONTHLY TO INSURE THE PAPER TAPE "SEAL" IS STILL IN TACT, THEREFORE CONFIRMING THE CONTENTS ARE COMPLETE. SHOULD THE SEAL BE BROKEN, THEY WILL INFORM THE NURSE & PCHA WHO will CHECK THE CONTENTS, VERIFY THEM & EITHER RESEAL THE KIT OR ORDER REPLACEMENT SUPPLIES TO COMPLETE THEM.

8-20-12 - The Administrator or designated STAFF person will place a thermometer in the Ford Van's first aid kit. 7-27-12

Repeat Violation: No	Date(s) of Previous Violation(s):			

Signature of Legal Entity Representative (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) MIKE BUDAI, PCHA

Date 7/25/12

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