



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

MAR 01 2014

Mr. John Williams, President  
Maple Valley Personal Care Home, Inc.  
2212 Anthony Run Road  
Indiana, Pennsylvania 15701

RE: Maple Valley Personal Care Home  
License #: 427690

Dear Mr. Williams:

As a result of the Department of Public Welfare's licensing inspection on December 5, 2013, of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) 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. 2600 must be maintained.

Your regular license for the period March 8, 2014 to March 8 2015 was issued on November 27, 2013. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink, appearing to read "Matthew J. Jones", with a long, sweeping horizontal line extending to the right.

Matthew J. Jones  
Acting Director

Enclosure  
License Inspection Summary

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

PCH Name: MAPLE VALLEY PERSONAL CARE HOME		License Number: 42769
Address: 2212 ANTHONY RUN ROAD, INDIANA, PA 15701		County: Indiana
Administrator: John Williams		Region: WEST
Legal Entity Name: MAPLE VALLEY PERSONAL CARE HOME INC		
Legal Entity Address: 2212 ANTHONY RUN ROAD, INDIANA, PA 15701		
Certificate(s) of Occupancy C-2 LP 05/01/2008 Dept L&I		<b>RECEIVED</b>  JAN 23 2014  WEST REGION FIELD OFFICE Human Services Licensing
<b>Staffing Hours</b>		
Resident Support: 0	Total Daily Staff: 27	Waking Staff: 20
Type of Inspection: Ind - Partial/Center head	BHA Docket Number:	Notice: Unannounced
<b>Reason(s) for Inspection(s)</b> Renewal, Indicator		
<b>On-Site Inspections Dates and Department Representatives On-Site</b> 12/05/2013: Pfaff, Vicki		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b>		
<b>Other Details</b>		
Partial or Full Triggers: 65d		Random Indicators: 93b, 104b, 131b, 162b, 253c
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 33 Number of Residents Served: 26 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 0 Number of Hospice Residents in past year: 2		<b>Number of Residents who:</b> Receive Supplemental Security Income: 2 Are 60 Years of Age or Older: 26 Have Mental Illness: 1 Have an Intellectual Disability: 0 Have a Mobility Need: 1 Have a Physical Disability: 0

JAN 23 2014

Violation Report: 42769 - 12/05/2013 - Pfaff, Vicki  
PCH Name: MAPLE VALLEY PERSONAL CARE HOME

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.65(d) - Direct care staff persons hired after April 24, 2006 may not provide unsupervised ADL services until completion of the following:

- (1) Training that includes a demonstration of job duties, followed by supervised practice.
- (2) Successful completion and passing the Department-approved direct care training course and passing of the competency test.
- (3) Initial direct care staff person training to include the following:
  - (i) Safe management techniques.
  - (ii) ADLs and IADLs.
  - (iii) Personal hygiene.
  - (iv) Care of residents with dementia, mental illness, cognitive impairments, mental retardation and other mental disabilities.
  - (v) The normal aging-cognitive, psychological and functional abilities of individuals who are older.
  - (vi) Implementation of the initial assessment, annual assessment and support plan.
  - (vii) Nutrition, food handling and sanitation.
  - (viii) Recreation, socialization, community resources, social services and activities in the community.
  - (ix) Gerontology.
  - (x) Staff person supervision, if applicable.
  - (xi) Care and needs of residents with special emphasis on the residents being served in the home.
  - (xii) Safety management and hazard prevention.
  - (xiii) Universal precautions.
  - (xiv) The requirements of this chapter.
  - (xv) Infection control.
  - (xvi) Care for individuals with mobility needs, such as prevention of decubitus ulcers (bed sores), incontinence, malnutrition and dehydration, if applicable to the residents served in the home.

2a. DESCRIPTION OF VIOLATION

Direct care staff person A started working for the home on 4/3/13 and provided unsupervised direct care services. Direct care staff person A did not complete the Department-approved direct care training course and pass the competency test until 10/10/13.

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.

*STAFF PERSON A HAD COMPLETED THE COMPETENCY TEST UPON HIRING HOWEVER MAPLE VALLEY COULD NOT LOCATE THE CERTIFICATE WHEN REVIEWING THE EMPLOYMENT FILE 6 MONTHS LATER. AT THAT POINT MAPLE VALLEY HAD THE STAFF PERSON RE-TAKE THE COMPETENCY TEST. MAPLE VALLEY WILL CONDUCT EARLYER REVIEWS OF A STAFF PERSONS FILE IN THE FUTURE. THE ADMINISTRATOR WILL CONDUCT SAID FILE REVIEWS*

*2-28-14 - The Administration of desk noted staff person will review all direct care staff records to ensure all direct care staff meet regulation 2600.65(d) 1-29-14*

Repeat Violation: No	Date(s) of Previous Violation(s):	
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Signature of Legal Entity Representative  
(Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *John Williams - ADMINISTRATOR* Date *1-22-14*

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

The above plan of correction is approved as of 1-24-14  
(Date)

Plan of correction implementation status as of 1-29-14  
(Date)

The above plan of correction was approved by [Signature]  
(Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress *1-24-14*
- Partially Implemented - Inadequate Progress
- Not Implemented