pennsylvania
DEPARTMENT OF PUBLIC WELFARE

MAY 0 2 2014

Mr. Michael McCalpin, Chief Operations Officer
Adelphoi Village, Inc.
1119 Village Way
Latrobe, Pennsylvania 15650

RE: Sweeney
1145 Mission Road
Latrobe, Pennsylvania 15650
License # 417680

Dear Mr. McCalpin:

As a result of the Department of Public Welfare's licensing inspection on March 4, 2014, March 5, 2014, March 6, 2014 and March 7, 2014, and the corrections you have made after our inspection, we have found the above facility to be in compliance with 55 Pa.Code Ch. 3800 (relating to Child Residential and Day Treatment Facilities).

Your regular license for the period June 3, 2014 to June 3, 2015 was issued on February 13, 2014. Your regular license remains in good standing.

Sincerely,

Matthew J. Jones/DK

Matthew J. Jones
Director

Enclosure
Licensing Inspection Summary

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

Facility Name: GEORGE J SWEENEY HOME	**License Number:** 41768
Address: 1145 MISSION ROAD, LATROBE, PA 15650	**County:** Westmoreland
Director: Todd Martin	**Region:** WEST

Legal Entity Name: ADELPHOI VILLAGE INC

Legal Entity Address: 1119 VILLAGE WAY, LATROBE, PA 15650

Certificate(s) of Occupancy

R-3
06/11/2012
Unity Township

Program Type:	**Licensed Capacity:**	**Number of Children Served:**
Residential Services	15	15

Type of Inspection: Full	**BHA Docket Number:**	**Notice:** Announced

Reason(s) for Inspection(s)

Renewal

On-Site Inspections Dates and Department Representatives On-Site

03/04/2014: Szurszewski, Erin; Joyce, Kylee; Dinardo, Anna; Kasmarik, Sarah; Pugh, Bridget
03/05/2014: Szurszewski, Erin; Joyce, Kylee; Dinardo, Anna; Kasmarik, Sarah; Pugh, Bridget
03/06/2014: Szurszewski, Erin; Joyce, Kylee; Dinardo, Anna; Kasmarik, Sarah; Pugh, Bridget
03/07/2014: Szurszewski, Erin; Joyce, Kylee; Dinardo, Anna; Kasmarik, Sarah; Pugh, Bridget

Off-Site Inspection Dates and Inspectors, if Applicable

Other Details

Partial or Full Triggers:

Random Indicators:

Child Demographic Data as of Inspection Dates

Age of Children:

0 to 5 years: 0

6 to 13 years: 0

14 to 17 years: 12

18 to 21 years: 3

Number of Children who:

Are Adjudicated Delinquent: 13

Are Dependent: 2

Have Mental Illness: 0

Have an Intellectual Disability: 0

Have a Physical Disability: 0

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WEST REGION FIELD OFFICE
Human Services Licensing

Licensing Inspection Summary: 41768 - 03/04/2014 - Szurszewski, Erin
Facility Name: GEORGE J SWEENEY HOME

1. REGULATION 55 Pa.Code §3800

3800.58(e) - Each staff person who will have regular and significant direct contact with children, shall complete training in first aid, Heimlich techniques and cardiopulmonary resuscitation at least every year. If a staff person has a formal certification from a recognized health care organization which is valid for more than 1 year, retraining is not required until expiration of the certification.

2a. DESCRIPTION OF VIOLATION

Staff Person A's most recent CPR training certification was dated 11/22/11 with an expiration date of 11/22/13.

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 has completed CPR training on March 14, 2014.
Staff person A is the Unit Supervisor. In the future, he will refer to the training Adelphoi Training Database to establish the appropriate expiration date for such certifications. Reminders will be posted in the unit for such trainings so they will not be missed by the Unit Supervisor or any of the unit staff.

Also, the Employee Development Supervisor will run bi-annual reports for all agency staff that are in need of CPR training. Once the report is ran, the staff, with a carbon copy to their direct supervisor, will be emailed instructed to sign up for the next available training. The Director of Human Resource and Director of Quality Assurance will also receive a copy of the bi-annual report and will work with Adelphoi Leadership to ensure there are no barriers for completion of CPR.

Please see copy of certification of completion and reminders posted in the unit.

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) Jennifer McClaren, Director of Quality Assurance

Date 4/2/14

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The above plan of correction is approved as of 4/22/14 (Date)

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

Plan of correction implementation status as of 4/22/14 (Date)

- [x] Fully Implemented
- [ ] Partially Implemented - Adequate Progress
- [ ] Partially Implemented - Inadequate Progress
- [ ] Not Implemented

STAFF PRIVACY CODING DOCUMENT
CHILD RESIDENTIAL LICENSING - 55 Pa. Code Chapter 3800

Facility Name: GEORGE J SWEENEY HOME	License Number: 417680

Designation	Staff Member's Name
A	[redacted]

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APR 03 2014
WEST REGION FIELD OFFICE
Human Services Licensing

Jennifer McClaren, Director of Quality Assurance
Printed Name and Title of Legal Entity Representative

Signature of Legal Entity Representative

4/2/14
Date

Date of Inspection: 03/04/2014