



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAR 30 2016

Mr. Damian Knauff, PCHA
CPSR Associates LLC
200 Stoops Drive
Monongahela, Pennsylvania 15063

RE: Mon Valley Care Center
License #: 418160

Dear Ms. Knauff:

As a result of the Department of Human Services' annual licensing inspection on January 6, 2016 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.

Sincerely,

A handwritten signature in black ink that reads "Matthew J. Jones".

Matthew J. Jones
Director /SH

Enclosure
License Inspection Summary

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

PCH Name: MON VALLEY CARE CENTER		License Number: 41816
Address: 200 STOOPS DRIVE, MONONGAHELA, PA 15063		County: Washington
Administrator: PHILIP RIPEPI AND DAMIAN KNAUFF		Region: WEST
Legal Entity Name: CPSR ASSOCIATES LLC		
Legal Entity Address: 200 STOOPS DRIVE, MONONGAHELA, PA 15063		RECEIVED
Certificate(s) of Occupancy C-1 11/14/2002 DOH		JAN 26 2016 WEST REGION FIELD OFFICE Human Services Licensing
Staffing Hours		
Resident Support: 0	Total Daily Staff: 42	Waking Staff: 32
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 01/06/2016: Bartlett, Patricia; Barry, Courtney		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 41	Number of Residents who:	
Number of Residents Served: 36	Receive Supplemental Security Income: 0	
Secured Dementia Care Unit in Home: No	Are 60 Years of Age or Older: 36	
Area:	Have Mental Illness: 0	
Secured Dementia Unit Capacity, if Applicable:	Have an Intellectual Disability: 0	
Number of Residents Served in Secured Dementia Care Unit, if applicable:	Have a Mobility Need: 6	
Number of Current Hospice Residents: 3	Have a Physical Disability: 0	
Number of Hospice Residents in past year: 10		

Violation Report: 41816 - 01/06/2016 - Bartlett, Patricia
PCH Name: MON VALLEY CARE CENTER

EAST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.96(a) - The home shall have a first aid kit that includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers.

2a. DESCRIPTION OF VIOLATION

The first aid kit in the 3rd floor nurses' station does not include tweezers and adhesive tape.

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.

Immediately tweezers and adhesive tape were added to the first aid kit in the 3rd floor nurse's station. A daily check list of the first aid kit was implemented (see attached) for three months, it will then be audited weekly (see attached) to ensure compliance with regulation PA. Code 2600

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Patricia Bartlett

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page)

DAMIAN K...
Nurse

Date 1/20/16

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

The above plan of correction is approved as of

1/20/16
(Date)

Plan of correction implementation status as of

1/25/16
(Date)

The above plan of correction was approved by

[Signature]
(Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 41816 - 01/06/2016 - Bartlett, Patricia
 PCH Name: MON VALLEY CARE CENTER

RECEIVED

1. REGULATION 55 Pa.Code §2600
 2600.103(i) - Outdated or spoiled food or dented cans may not be used.

JAN 16 2016

WEST REGION FIELD OFFICE
 Human Services Licensing

2a. DESCRIPTION OF VIOLATION

The following undated foods were stored in the walk-in freezer:

- *15 chicken patties
- *Approximately 2 pounds of hash browns

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.

Immediate Action:

- 1) The undated 15 chicken patties and approximately 2 pounds of hash browns were discarded.
- 2) The Director of Nutritional Services will hold a staff meeting on 01/22/16 to review the procedure for proper labeling and dating of food products. The Director will initiate and instruct staff on the use of Enhanced Food Safety Labels.
- 3) The Registered Dietitian, dietary manager, head cook, or assigned designee will perform a daily audit of food storage areas every day for 3 months, then weekly for 3 months, then once a month for 3 months to ensure that all food items are correctly labeled and dated.

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Date 1/22/16

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

The above plan of correction is approved as of 1/25/16
 (Date)

Plan of correction implementation status as of 1/25/16
 (Date)

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

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented