



pennsylvania
DEPARTMENT OF HUMAN SERVICES

SEP 23 2016

Mr. Craig L. Anlauf, Treasurer
Pleasant Ridge Mature Living, LLC
369 Bethel Road
North Huntingdon, Pennsylvania 15642

RE: Pleasant Ridge Mature Living
981 Pleasant Hill Road
Leechburg, Pennsylvania 15656
License #: 429400

Dear Mr. Anlauf:

As a result of the Department of Human Services' annual licensing inspections on May 3, 2016 and May 4, 2016, and the corrections you have made after our inspection, we have found the above facility to be in compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes).

Sincerely,

A handwritten signature in black ink, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
Licensing Inspection Summary

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

PCH Name: Pleasant Ridge Mature Living		License Number: 42940
Address: 981 Pleasant Hill Road, Leechburg, PA		County: Westmoreland
Administrator: Jessica Butkar		Region: CENTRAL
Legal Entity Name: Pleasant Ridge Mature Living, LLC		
Legal Entity Address: 369 Bethel Road, North Huntingdon, PA 15642		
Certificate(s) of Occupancy		
C-2 LP 07/07/1998 Labor and Industry		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 62	Waking Staff: 47
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Renewal		
On-Site Inspections Dates and Department Representatives On-Site		
05/03/2016: Gillespie, Denise; Rosenblat, Dale		
05/04/2016: Gillespie, Denise; Rosenblat, Dale		
Off-Site Inspection Dates and Inspectors, if Applicable		
<p>RECEIVED</p> <p>AUG 10 2016</p> <p>CENTRAL REGION FIELD OFFICE Human Services Licensing</p>		
Other Details		
Partial or Full Triggers: N/A		Random Indicators: N/A
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 75 Number of Residents Served: 41 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: 13 Number of Hospice Residents in past year: 43	Number of Residents who: Receive Supplemental Security Income: 10 Are 60 Years of Age or Older: 38 Have Mental Illness: 10 Have an Intellectual Disability: 1 Have a Mobility Need: 21 Have a Physical Disability: 1	

Violation Report: 42940 - 05/03/2016 - Gillespie, Denise
 PCH Name: Pleasant Ridge Mature Living

1. REGULATION 55 Pa.Code §2600
 2600.85(b) - There may be no evidence of infestation of insects or rodents in the home.

2a. DESCRIPTION OF VIOLATION

There were two active bee's nests and two hornet's nests ocated in the eaves above the 2nd floor patio.

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.

All four nests where removed and chemically treated at the time of inspection. Monthly maintenance program has been set forth to maintain exterior of the facility for any infestation of insects or rodents by the facility maintenance personal. Pest control is already in use at the facility, and the home will keep record of this to show compliance.

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) *Jessica Botten* Date *7-10-16*

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

The above plan of correction is approved as of 8-16-16
 (Date)

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

Plan of correction implementation status as of 8-16-16
 (Date)

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

Violation Report: 42940 - 05/03/2016 - Gillespie, Denise
 PCH Name: Pleasant Ridge Mature Living

1. REGULATION 55 Pa.Code §2600
 2600.100(a) - The exterior of the building and the building grounds or yard must be in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION
 At the entrance door, the outside cement pad is not level with the asphalt and presents a tripping hazard to residents entering/ exiting the home.

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.

The cement pad was ground to remove any tripping hazards. The home will monitor all egress routes from the home on an annual basis to prevent future tripping hazards.

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)	Date
Jessica Butken	7-10-16

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

The above plan of correction is approved as of 8-16-16
 (Date)

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

Plan of correction implementation status as of 8-16-16
 (Date)

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

Violation Report: 42940 - 05/03/2016 - Gillespie, Denise
 PCH Name: Pleasant Ridge Mature Living

1. REGULATION 55 Pa.Code §2600

2600.121(b) - Doors used for egress routes from rooms and from the building may not be equipped with key-locking devices, electronic card operated systems or other devices which prevent immediate egress of residents from the building, unless the home has written approval or a variance from the Department of Labor and Industry, the Department of Health or the appropriate local building authority.

2a. DESCRIPTION OF VIOLATION

The exterior gate leading to the parking lot from the second floor of the building is locked magnetically and requires a code to enter and exit the gate. The home does not have written approval from Department of Labor, Department of Health, or the local building authority for this locking device.

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.

This was fixed while inspectors where on premises. The magnetic lock on exterior gate was immediately removed at time of inspection. The home did evaluate all other egress routes to insure there was not any other locking devices. The home will annually inspect the premises to insure there are not any other locking devices found.

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Jessica Butler*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Jessica Butler* Date *7-10-16*

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

The above plan of correction is approved as of *8-16-16*
 (Date)

The above plan of correction was approved by *JB*
 (Initials)

Plan of correction implementation status as of *8-16-16*
 (Date)

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