



pennsylvania
DEPARTMENT OF HUMAN SERVICES

DEC 19 2016

Mr. Michael Haass, President
Walden View North Huntingdon OPCO, LLC
7990 US Route 30
North Huntingdon, Pennsylvania 15642

RE: Walden's View at North Huntingdon
License #: 446800

Dear Mr. Haass:

As a result of the Department of Human Services' annual licensing inspections on October 4, 2016 and October 5, 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, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

Violation Report: 44680 - 10/04/2016 - McCloskey, Jason
 PCH Name: WALDEN'S VIEW AT NORTH HUNTINGDON

1. REGULATION 55 Pa.Code §2600

2600.25(a)(1) - Prior to admission, or within 24 hours after admission, a written resident-home contract (contract) between the resident and the home shall be in place.

2a. DESCRIPTION OF VIOLATION

The current legal entity took over management of the home on 7-31-15, however, the new contracts for Residents 1, 2 and 3 were not signed until 10-17-15.

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.

Refer to Page 2A of 7

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Debrah Stetzer

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

Debrah Stetzer

Date *11/2/16*

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

The above plan of correction is approved as of *11/4/16*
 (Date)

Plan of correction implementation status as of *11/4/16*
 (Date)

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

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

PLAN OF CORRECTION FOR VIOLATION 2600.25(a) (1) The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and consigned by the resident's designated person if any, if the resident agrees.

- An immediate review of all contracts was completed the week of October 17, 2016.
- All Walden's View contracts have been signed by the residents.
- The Senior Solutions Specialist [REDACTED] will have all residents sign or mark the contract upon admission. If resident makes a mark [REDACTED] will sign as the witness.
- The Executive Director [REDACTED] will review all new contracts and initial that all signatures are included.

Deborah Stetzer Dunn Stje 11/2/16

Violation Report: 44680 - 10/04/2016 - McCloskey, Jason
 PCH Name: WALDEN'S VIEW AT NORTH HUNTINGDON

1. REGULATION 55 Pa.Code §2600

2600.25(b) - The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

2a. DESCRIPTION OF VIOLATION

The contracts for Residents 3 and 4 were not signed by the resident.

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.

Refer to Page 3A of 7

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Deborah Stetzer

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

Deborah Stetzer

Date *11/2/16*

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

The above plan of correction is approved as of 11/4/16
 (Date)

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

Plan of correction implementation status as of 11/4/16
 (Date)

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

Page 3A of 7

PLAN OF CORRECTION FOR VIOLATION 2600.25 (b) The contract shall be signed by the administrator or a designee, the resident and payer, if different from the resident, and cosigned by the resident's designated person, if any, if the resident agrees.

- An audit was done of all contracts the week of October 17th.
- All contracts have been signed by the Administrator or designee, residents and payer and cosigned by the resident's designated person.
- The Senior Solutions Specialist [REDACTED] will have all contracts signed by the Administrator or designee upon admission. The resident and payer will sign and the resident's designated person will sign if the resident agrees.
- The Executive Director will review and initial all contracts to ensure all signatures are present.

Deborah Stetzer Debra Stetzer 11/2/16

Violation Report: 44680 - 10/04/2016 - McCloskey, Jason
 PCH Name: WALDEN'S VIEW AT NORTH HUNTINGDON

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, hired on [redacted] 16, did not take the Department-approved direct-care competency test until 10-4-16. This staff person performed unsupervised ADL services prior to the 10-4-16 date.

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.

Refer to page 4A of 7

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

Signature of Legal Entity Representative <i>(Required on EVERY Page)</i>	
-----------------------------------------------------------------------------	-------------------------------------------------------------------------------------

Printed Name and Title of Legal Entity Representative <i>(Required on EVERY Page)</i>	Date
<i>Deborah Stetzer</i>	<i>11/2/16</i>

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

The above plan of correction is approved as of <u>11/4/16</u> (Date)	Plan of correction implementation status as of <u>11/9/16</u> (Date)
The above plan of correction was approved by <u>BAS</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation of regulation 2600.65(d) Direct care staff persons hired after April 24, 2006 may not provide unsupervised ADL services until completion of the following (2).

- Employee A completed the Department-approved direct-care competency test on October 4th, 2016.
- The Business Office Manager [REDACTED] completed an audit of all employee charts. All employee files were in compliance.
- The Business Office Manager [REDACTED] will use a check off list to ensure that all employees have completed all regulatory requirements. (See Attachment).
- The Business Office Manager [REDACTED] will conduct a monthly audit for all newly hired direct-care staff.

* Staff will not be permitted to perform unsupervised ADL services until the elements of 2600.65(d) have been completed in full.

BAS 11/4/16

Deborah Stetzer *Deborah Stetzer* 11/2/16

Violation Report: 44680 - 10/04/2016 - McCloskey, Jason
 PCH Name: WALDEN'S VIEW AT NORTH HUNTINGDON

1. REGULATION 55 Pa.Code §2600
 2600.109(b) - Cats and dogs present at the home shall have a current rabies vaccination. A current certificate of rabies vaccination from a licensed veterinarian shall be kept.

2a. DESCRIPTION OF VIOLATION
 On 10-4-16, Resident 5's cat was present in the home. The most current certificate of rabies vaccination for this cat expired on 7-1-16.

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.

Refer to page 5A of 7

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

Signature of Legal Entity Representative
 (Required on EVERY Page)

Deborah Stetzer

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

Deborah Stetzer Date *11/2/16*

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

The above plan of correction is approved as of <u>11/4/16</u> (Date)	Plan of correction implementation status as of <u>11/4/16</u> (Date)
The above plan of correction was approved by <u>BAS</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Page 5A of 7

Violation of regulation 2600.109 (b) Cats and dogs present in the home shall have a current rabies vaccination. A current certificate of rabies vaccination from a licensed veterinarian shall be kept.

- The cat belonging to resident 5 was taken to the veterinarian on October 5, 2016 and received his rabies vaccination.
- A complete audit of all pet records was completed the week of October 27, 2016. All pet records were compliant.
- The Business Office Manager [REDACTED] will complete a monthly audit and sign off sheet for the pet record book to ensure that no other vaccinations have expired (see attachment).

Deborah Stetzer  11/2/16

Violation Report: 44680 - 10/04/2016 - McCloskey, Jason
 PCH Name: WALDEN'S VIEW AT NORTH HUNTINGDON

1. REGULATION 55 Pa.Code §2600
 2600.127(a) - Portable space heaters are prohibited.

2a. DESCRIPTION OF VIOLATION
 On 10-4-16, a plug-in electric fireplace space heater was present in the resident lounge.

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.

Refer to Page 6A of 7

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

Signature of Legal Entity Representative (Required on EVERY Page)	<i>Deborah Steiner</i>
----------------------------------------------------------------------	------------------------

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
Deborah Steiner	11/2/16

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

The above plan of correction is approved as of 11/4/16
 (Date)

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

Plan of correction implementation status as of 11/4/16
 (Date)

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

Page 6A of 7

Violation of regulation 2600.127 (a) Portable space heaters are prohibited.

- The fireplace was removed and discarded immediately on October 5th, 2016.
- A building audit was completed immediately by the Environmental Services Director [REDACTED], there were no other heaters found.
- The Environmental Services Director [REDACTED] or his assistant [REDACTED] will complete a bi-monthly inspection to ensure that there are no portable heaters. The inspection was begun on October 17, 2016. The Environmental Services Director or his assistant will sign the bi-monthly sheet (see attachment).

Deborah Stetzer Della Stetzer 11/2/16

Violation Report: 44680 - 10/04/2016 - McCloskey, Jason
 PCH Name: WALDEN'S VIEW AT NORTH HUNTINGDON

1. REGULATION 55 Pa.Code §2600

2600.144(c) - A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures that include 2600.144(c)1-3.

2a. DESCRIPTION OF VIOLATION

The home's designated smoking area is in the rear of the home. On 10-5-16, a smoking receptacle was located at the front of the home next to two metal benches and a metal chair. There were nine cigarette butts scattered around the area and the benches and chair had throw cushions that did not include tags indicating that they are resistant to fire. This area of the home is not designated as a permitted smoking area.

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.

Refer to Page 7A of 7

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

Signature of Legal Entity Representative <i>(Required on EVERY Page)</i>	<i>Deborah Steiner</i>		
-----------------------------------------------------------------------------	------------------------	--	--

Printed Name and Title of Legal Entity Representative <i>(Required on EVERY Page)</i>	Date
<i>Deborah Steiner</i>	<i>11/2/16</i>

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

The above plan of correction is approved as of *11/7/16*
 (Date)

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

Plan of correction implementation status as of *11/7/16*
 (Date)

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

Violation of regulation 2600.144 (c) A home that permits smoking inside or outside of the home shall development written fire safety policy and procedures that include 2600.144(c) 1-3

- All furniture coverings (pillows) were removed on October 5, 2016.
- Walden's View will follow the smoking policy (see attachment).
- The Environmental Services Director [REDACTED] or his assistant [REDACTED] will check the furniture as part of his bi-monthly safety check list.

* The home has removed the smoking receptacle from the front of the building so that this space is not thought to be a designated smoking area of the home.

BAS 11/7/16

Deborah Stetzer [Signature] 11/2/16