



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFICATE OF COMPLIANCE**

This certificate is hereby granted to THE HAVEN AT NORTH HILLS LLC  
LEGAL ENTITY

To operate THE HAVEN AT NORTH HILLS  
NAME OF FACILITY OR AGENCY

Located at 1 WINDSOR WAY, PITTSBURGH, PA 15237  
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

To provide Personal Care Homes  
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 90  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller. (MAXIMUM CAPACITY)

**Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 24**

Restrictions: \_\_\_\_\_

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes  
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from November 1, 2018 until November 1, 2019,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **449380**

Robert E. Robinson  
ISSUING OFFICER

Carolyn K. Ellison  
DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

NOV 01 2018

Mr. Luis Serrano  
President  
The Haven at North Hills, LLC  
114 Pacifica, Suite 310  
Irvine, California 92618

RE: The Haven at North Hills  
One Windsor Way  
Pittsburgh, Pennsylvania 15237  
License #: 449380

Dear Mr. Serrano:

As a result of the Department's Bureau of Human Services Licensing inspection on August 14, 2018, of the above facility, we have found that your facility is in substantial compliance with the regulations, set forth in 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because this is a new legal entity operating the home.

During the inspection, violations on the enclosed License Inspection Summary were found. All violations specified on the 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 NEW license is enclosed, based on substantial but not complete compliance with 55 Pa.Code Ch. 2600.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services provider application submission experience. To participate in the online applicant survey, launch your web browser and go to [https://www.surveymonkey.com/r/BHSL\\_Application](https://www.surveymonkey.com/r/BHSL_Application).

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential.

Mr. Luis Serrano

The responses will be reviewed as part of an aggregate of provider applicant responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Rowe". The signature is fluid and cursive, with the first letter "J" being particularly large and stylized.

Jacqueline L. Rowe  
Director

Enclosures  
License  
License Inspection Summary



Violation Report 44938 - 08/14/2018 - Eveges, Joseph	Western Region Field Office
PCH Name: THE HAVEN AT NORTH HILLS	Bureau of Human Services Licensing

1. REGULATION 55 Pa.Code §2600  
 2600.95 - Furniture and equipment must be in good repair, clean and free of hazards.

2a. DESCRIPTION OF VIOLATION  
 The hand railing between rooms #306 and #307 was not securely attached to the wall and moved approximately 1" up and down when gripped, posing a fall hazard.  
  
 The double fire doors between the hallway and 3rd floor kitchenette did not properly latch closed, causing one door to stick out approximately 1/8" from the other door.

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: Maintenance Director tightened the hand railing to ensure proper assist to all residents

Immediately: Maintenance Director checked all hand rails to ensure the safety of the residents

Monthly: Maintenance Director will test the safety of all handrails to ensure the residents safety. This task has been added to our electronic maintenance program.

Please see Pictures attached.

Immediately: The fire door panic bar latch and hinges were adjusted to be sure the door closed completely during an emergency/drill.

Immediately: Maintenance Director checked all emergency fire doors for accuracy during opening and closing

Monthly: Maintenance Director checked all emergency exits and fire doors for accuracy during opening and closing to ensure residents safety. This will be documented on our electronic maintenance program.

Please see pictures attached

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 GROSS RN	Date 10.2.2018
---	----------------

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

The above plan of correction is approved as of <u>10/04/18</u> (Date)	Plan of correction Implementation status as of <u>10/04/18</u> (Date)
The above plan of correction was approved by <u>SO</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <u>SO</u> <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 44938 - 08/14/2018 - Eveges, Joseph PCH Name: THE HAVEN AT NORTH HILLS	Western Region Field Office Bureau of Human Services Licensing
---	---

1. REGULATION 55 Pa.Code §2600  
2600.121(a) - Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

2a. DESCRIPTION OF VIOLATION  
The fire exit door leading from the 1st floor stairwell to the parking lot, near the employee entrance, would not open when the panic bar was engaged and forcefully pushed.

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: Maintenance Director repaired concrete and bottom of emergency egress door, so it would open and close without problem

Immediately: Maintenance Director checked all egress routes and doors to be sure they are unobstructed and open freely.

Monthly: Maintenance Director will check all egress routes and doors to be sure they are unobstructed and open freely.

Monthly: Maintenance Director will document the checks on our electronic maintenance program.

Please see pictures attached.

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
Jennifer Grossman	10.2.2018

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

The above plan of correction is approved as of 10/04/18  
(Date)

Plan of correction implementation status as of 10/04/18  
(Date)

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

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