

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC

June 29, 2023

[REDACTED]
VALLEY VIEW HAVEN
4702 EAST MAIN STREET
BELLEVILLE, PA, 17004

RE: VALLEY VIEW HAVEN
4702 EAST MAIN ST. THE TERRACE
BELLEVILLE, PA, 17004
LICENSE/COC#: 33552

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/23/2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,

[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: VALLEY VIEW HAVEN License #: 33552 License Expiration: 03/21/2024
 Address: 4702 EAST MAIN ST.-THE TERRACE, BELLEVILLE, PA 17004
 County: MIFFLIN Region: CENTRAL

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: VALLEY VIEW HAVEN
 Address: 4702 EAST MAIN STREET, BELLEVILLE, PA, 17004
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C 2 LP Date: 12/08/2000 Issued By: Labor and Industry
 Type: C 1 Date: 05/07/1998 Issued By: Dept of Health

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 82 Waking Staff: 62

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
 Reason: Renewal Exit Conference Date: 05/24/2023

Inspection Dates and Department Representative

05/23/2023 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 95 Residents Served: 82
 Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:
 Hospice
 Current Residents: 1
 Number of Residents Who:
 Receive Supplemental Security Income: 4 Are 60 Years of Age or Older: 82
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 2
 Have Mobility Need: 0 Have Physical Disability: 1

Inspections / Reviews

05/23/2023 - Full
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 06/09/2023

06/13/2023 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 06/26/2023
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 06/23/2023

Inspections / Reviews *(continued)*

06/26/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/26/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 06/30/2023

06/29/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/26/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

103i - Outdated Food

1. Requirements

2600.
103.i. Outdated or spoiled food or dented cans may not be used.

Description of Violation

Inside the dry goods storage of the kitchen there was a dented can of Mandurian Oranges (6 lbs. 10oz) and a dented can of Red Pack Spaghetti Sauce (106 oz).

Plan of Correction

Accept (█) - 06/26/2023)

Education regarding dented cans conducted by the Assistant Director of Nutrition Services has been completed with all team members who receive the order and stock the shelves in dry goods storage. The food storage policy and the regulation have been reviewed with each of them (see attached policy, education and sign in sheet). Additional education has been completed by the Administrator at the Terrace All Staff meeting on 6/7/23 with personal care team members.

Food is delivered twice weekly and dented cans will be audited twice weekly with the order delivery (which is typically on Tuesday and Friday weekly) for a period of 90 days and weekly thereafter for the remainder of the year. (see attached form to be used for documentation effective 6/6/23). Results of audit will be captured in monthly quality improvement meeting minutes completed by the Administrator.

Licensee's Proposed Overall Completion Date: 06/22/2023

Implemented (█) 06/29/2023)

227g -Support Plan Signatures

2. Requirements

2600.
227.g. Individuals who participate in the development of the support plan shall sign and date the support plan.

Description of Violation

Resident 1 s Resident Assessment Support Plan (RASP) from █/2023 is signed by both the resident and the assessor. However, neither the resident or the assessor dated the RASP when signed.

Plan of Correction

Accept (█) - 06/26/2023)

Education has been completed with the Support Plan Coordinator and Administrator to ensure that all RASP's are dated moving forward.

The Administrator or designee will audit new support plans on a monthly basis for the next year (through June 2024) to ensure that all documents are dated appropriately. This audit will be documented via the attached form. Results of this audit will be reported and documented in the quarterly quality improvement meeting minutes. Additional education provided by the Administrator was completed at the Terrace All Staff meeting on 6/7/23.

Licensee's Proposed Overall Completion Date: 06/22/2023

Implemented (█) 06/29/2023)