

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

June 30, 2026

[REDACTED], DIRECTOR OF RESIDENT LIVING
MARS HOLDING INC
[REDACTED]

RE: ROSECREST ASSISTED LIVING
RESIDENCE
1000 GRAHAM WAY, P.O.BOX 1285
MARS, PA, 16046
LICENSE/COC#: 44445

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/09/2026 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: ROSECREST ASSISTED LIVING RESIDENCE License #: 44445 License Expiration: 06/21/2026
 Address: 1000 GRAHAM WAY, P.O.BOX 1285, MARS, PA 16046
 County: BUTLER Region: WESTERN

Administrator

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

Legal Entity

Name: MARS HOLDING INC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: I-1 Date: 04/11/2011 Issued By: Mars

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 40 Waking Staff: 30

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
 Reason: Renewal, Complaint, Incident Exit Conference Date: 04/09/2026

Inspection Dates and Department Representative

04/09/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 30 Residents Served: 20

Special Care Unit
 In Residence: Yes Area: The Facility Capacity: 30 Residents Served: 20

Hospice
 Current Residents: 11

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 20
 Diagnosed with Mental Illness: 1 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 20 Have Physical Disability: 0

Inspections / Reviews

04/09/2026 Full
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 05/11/2026

05/21/2026 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 06/04/2026
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 06/04/2026

Inspections / Reviews *(continued)*

06/30/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/04/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

42c Dignity/Respect

1. Requirements

2800.
42.c. A resident shall be treated with dignity and respect.

Description of Violation

On or about [REDACTED] staff person A made a video recording of resident #1 and posted the video on Snapchat. [REDACTED] did this without resident #1's consent. During the video, Staff person A said,

"You did not just wipe your booger on my leg. I just wiped it back on you. That's disgusting. It's still on my leg. You're disgusting for that."

This statement treated resident #1 in a way that was undignified and disrespectful.

Plan of Correction

Accept ([REDACTED] - 05/21/2026)

Staff Person A was terminated on [REDACTED]. The administrator or designee will educate staff on Reg.42c by 5/27/2026. The administrator or designee will survey 3 residents every month for the next 3 months to ensure they are being treated with dignity and respect within the home beginning 5/22/2026. The results of the audits will be discussed in the quarterly QAPI meetings. Next QAPI meeting will be held June 12, 2026.

Licensee's Proposed Overall Completion Date: 05/27/2026

Implemented ([REDACTED] - 06/30/2026)

42s Privacy - self/possessions

2. Requirements

2800.
42.s. A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.

Description of Violation

On or about [REDACTED] staff person A made a video recording of resident #1 and posted the video on Snapchat. [REDACTED] did this without resident #1's consent.

Plan of Correction

Accept ([REDACTED] - 05/21/2026)

Staff Person A was terminated on [REDACTED]. The administrator or designee will educate staff on Reg.42s by 5/27/2026, and will be repeated in 6 months and yearly thereafter. All new hires will be educated on 42s during orientation by the administrator or designee. The administrator or designee will survey 3 residents every month for the next 3 months to ensure they feel their privacy is protected within the home beginning 5/22/2026. The results of the audits will be discussed in the quarterly QAPI meetings. Next QAPI meeting will be held June 12, 2026.

Licensee's Proposed Overall Completion Date: 05/27/2026

Implemented ([REDACTED] - 06/30/2026)

85a Sanitary conditions

3. Requirements

2800.
85.a. Sanitary conditions shall be maintained.

85a Sanitary conditions (continued)

Description of Violation

There was a heavy accumulation of lint on the floor behind the dryer, on the water lines, and around the lint trap.

No paper towels, mechanical hand dryer or other sanitary means to dry hands were available in the powder room next to bedroom #207 in Pebblebrook.

Plan of Correction

Accept (█ - 05/21/2026)

The dryer vent, water lines, and wall behind dryer were cleaned 4/10/2026. Maintenance staff and RoseCrest staff will be educated by the administrator or designee on Reg 2800.85a by 5/27/2026. Maintenance staff will conduct bi-weekly checks of the dryer vent, water lines, and wall behind dryer beginning 5/17/2026. A sign off sheet will be kept in the laundry room and signed off by the maintenance assistant or designee responsible for checking and cleaning the dryer vent, water lines, and wall behind dryer. The administrator or designee will conduct a monthly audit beginning 5/22/2026 of checks for accuracy and compliance with the regulation. The results of the audits will be discussed in the quarterly QAPI meetings. Next QAPI meeting will be held June 12, 2026.

The batteries on the paper towel dispenser were changed 4/9/2026 allowing paper towels to come out properly. RoseCrest staff will be educated by the administrator or designee on Reg 2800.85a by 5/27/2026. The administrator or designee will conduct a monthly audit to ensure battery operated paper towel dispensers are working properly beginning 5/22/2026 for accuracy and compliance with this regulation. The results of the audits will be discussed in the quarterly QAPI meetings. Next QAPI meeting will be held June 12, 2026.

Licensee's Proposed Overall Completion Date: 05/27/2026

Implemented (█ - 06/30/2026)

100a Exterior – free of hazards

4. Requirements

2800.

100.a. The exterior of the building and the building grounds or yard must be in good repair and free of hazards.

Description of Violation

The nonskid surfaces on the ramp outside bedroom #204 were peeling and missing in places. This posed a tripping hazard.

Plan of Correction

Accept (█ - 05/21/2026)

A quote was obtained for the ramp outside of #204. Nonskid surfaces are to be repaired/replaced by 5/31/2026 by an outside contractor. Maintenance staff was educated by the administrator on Reg 2800.100a by 5/27/2026. Beginning 5/22/2026 and ongoing, the maintenance department will check the exterior of building and grounds monthly to ensure they are in good repair and free of hazards. A sign off sheet will be kept at RoseCrest and signed off by the maintenance assistant or designee responsible for checking the exterior of the building. The administrator or designee will complete monthly audits of checks for accuracy and compliance with the regulation beginning 5/22/2026. The results of the audits will be discussed in the quarterly QAPI meetings. Next QAPI meeting will be held June 12, 2026.

Licensee's Proposed Overall Completion Date: 05/31/2026

Implemented (█ - 06/30/2026)

183d Current medications

5. Requirements

2800.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the residence.

Description of Violation

Resident #1 was prescribed Acetaminophen 2 caplets by mouth twice daily. This medication was discontinued on 4/7/26; however, the medication remained in the medication cart on 4/9/26.

Plan of Correction

Accept ([redacted] - 05/21/2026)

The discontinued medication was removed from the cart and destroyed on 4/9/2026. Nursing Supervisor or designee will complete weekly audits of med carts for 3 months and monthly audits of med carts indefinitely beginning 4/15/2026.

Nursing Supervisor or designee will educate staff on current medications and disposal of expired medications by 5/27/2026. Results of audits will be reviewed in QAPI meetings until substantial compliance is obtained or ongoing, as needed, beginning 4/15/2026. Next QAPI meeting will be held June 12, 2026.

Licensee's Proposed Overall Completion Date: 05/27/2026

Implemented ([redacted] - 06/30/2026)