

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

May 1, 2023

[REDACTED], EXECUTIVE DIRECTOR
HSRE-WATERS OF PETERS VII, LLC
[REDACTED]

RE: THE WATERS OF MCMURRAY
441 VALLEY BROOK ROAD
MCMURRAY, PA, 15317
LICENSE/COC#: 45278

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 04/19/2023 of the above facility, no regulatory citations have been identified as a result of this inspection.

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

Sincerely,
[REDACTED]

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: *THE WATERS OF MCMURRAY* License #: *45278* License Expiration: *04/26/2024*
 Address: *441 VALLEY BROOK ROAD, MCMURRAY, PA 15317*
 County: *WASHINGTON* Region: *WESTERN*

Administrator

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

Legal Entity

Name: *HSRE-WATERS OF PETERS VII, LLC*
 Address: [REDACTED]

Certificate(s) of Occupancy

Type: *I-1* Date: *02/19/2021* Issued By: *Peters Township*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *94* Waking Staff: *71*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint* Exit Conference Date: *04/19/2023*

Inspection Dates and Department Representative

04/19/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *127* Residents Served: *63*

Special Care Unit
 In Home: *Yes* Area: *SCU* Capacity: *21* Residents Served: *14*

Hospice
 Current Residents: *2*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *63*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *31* Have Physical Disability: *1*

Inspections / Reviews

04/19/2023 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *Not Required*

NO DEFICIENCIES FOUND