

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to ELWYN, INC.

LEGAL ENTITY

To operate ELWYN - RAINBOW HOUSE

NAME OF FACILITY OR AGENCY

Located at 64 EAST OLD BALTIMORE PIKE, ELWYN, PA 19063

(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 6
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions: _____

This certificate is granted in accordance with the Public Welfare 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 March 5, 2010 until March 5, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 122670

Robert E. Robinson

ISSUING OFFICER

Kurt T. Casey

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.

PW 628 - 4/02



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
PO BOX 2675
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

MAR 05 2010

PHONE: (717) 783-3670
FAX: (717) 783-5662

Ms. Patricia Monroe, Assistant Director
Elwyn, Inc.
111 Elwyn Road – Hartman House
Elwyn, Pennsylvania 19063

RE: Elwyn – Rainbow House
64 East Old Baltimore Pike
Elwyn, Pennsylvania 19063

Dear Ms. Monroe:

As a result of the Department of Public Welfare's licensing inspection on August 12, 2009 and of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

Sincerely,

A handwritten signature in cursive script that reads "Kevin T. Casey".

Kevin T. Casey
Deputy Secretary

Enclosures
License
Violation Report

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

Nov. 5, 2009 9:57AM

NAME AND ADDRESS OF PERSONAL CARE HOME Elwyn - Rainbow House 64 East Old Baltimore Pike, Elwyn, PA 19063		CURRENT LICENSE NUMBER 122670	
INSPECTION DATE(S) (include all dates of the inspection) August 12, 2009		REGIONAL REPRESENTATIVE Leslie Erhardt, Christine McHale, Patricia Adams	
SIGNATURE OF LEGAL ENTITY <i>Patricia Adams</i>	DATE 11-3-09	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 2/24/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
65a Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following: (1) Evacuation procedures. (2) Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable.	Staff person hired 8/2/2008, did not receive this required orientation.	9/1/09	Orientation Form will be completed 24 hours prior to or on the 1st day of work at the site. The unit manager will review the form with the staff in case they have any questions.	<i>[Signature]</i> 2/24/10

No. 6515 P. 3/33

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

No. 6515 P. 4/33


NAME AND ADDRESS OF PERSONAL CARE HOME Elwyn - Rainbow House 64 East Old Baltimore Pike, Elwyn, PA 19063		CURRENT LICENSE NUMBER 122670
INSPECTION DATE(S) (Include all dates of the inspection) August 12, 2009		REGIONAL REPRESENTATIVE Leslie Erhardt, Christine McHale, Patricia Adams
SIGNATURE OF LEGAL ENTITY <i>Patricia Adams</i>	DATE 11-3-09	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION
		DATE


1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
(3) The designated meeting place outside the building or within the fire-safe area in the event of an actual fire. (4) Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable. (5) The location and use of fire extinguishers. (6) Smoke detectors and fire alarms. (7) Telephone use and notification of emergency services.				

Nov. 5, 2009 9:57AM

VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

No. 6515 P. 10/33

NAME AND ADDRESS OF PERSONAL CARE HOME Elwyn - Rainbow House 64 East Old Baltimore Pike, Elwyn, PA 19063		CURRENT LICENSE NUMBER 122670
INSPECTION DATE(S) (Include all dates of the inspection) August 12, 2009		REGIONAL REPRESENTATIVE Leslie Erhardt, Christine McFale, Patricia Adams
SIGNATURE OF LEGAL ENTITY	DATE 11-3-09	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 
		DATE 2/24/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
103f Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers shall be required in refrigerators and freezers.	The home's refrigerator and freezer did not have a thermometer.	8/13/09	The issue was addressed by the Unit Director at the 8/13/09 staff meeting to all the staff. The issue was corrected at the time of inspection. The Unit manager will check on a weekly basis to ensure thermometers are present and working properly.	 2/24/10

Nov. 5. 2009 9:58AM

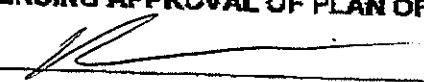
VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600


NAME AND ADDRESS OF PERSONAL CARE HOME Elwyn - Rainbow House 64 East Old Baltimore Pike, Elwyn, PA 19083		CURRENT LICENSE NUMBER 122670
INSPECTION DATE(S) (include all dates of the inspection) August 12, 2009		REGIONAL REPRESENTATIVE Leslie Erhardt, Christine McHale, Patricia Adams
SIGNATURE OF LEGAL ENTITY <i>Patricia Monme</i>	DATE 11-3-09	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>
		DATE 2/24/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (Include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
187a A medication record shall be kept to include the following for each resident for whom medications are administered: (12) Diagnosis or purpose for the medication, including pro re nata (PRN).	-Resident #1's medication administration record (MAR) did not have diagnosis for the resident's Pred Forte drops, Sodium Chloride 5% ointment, Risperdal 4mg tablets, or Nystatin with Triamcinolone. -Resident #2's MAR did not have a diagnosis for the resident's Divalproex Sodium 500mg medication.	8/13/09	Diagnosis was added on all resident mar's. This issue was addressed by The Unit Director at the 8/13/09 staff meeting. mar's will include diagnosis from this point forward. The Pharmacy, who prints the mar's was notified. The mar's will be reviewed weekly by a nurse or the unit manager.	<i>[Signature]</i> 2/24/10

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

No. 6515 P. 23/33

NAME AND ADDRESS OF PERSONAL CARE HOME Elwyn - Rainbow House 64 East Old Baltimore Pike, Elwyn, PA 19063		CURRENT LICENSE NUMBER 122678
INSPECTION DATE(S) (Include all dates of the inspection) August 12, 2009		REGIONAL REPRESENTATIVE Leslie Erhardt, Christine McHale, Patricia Adams
SIGNATURE OF LEGAL ENTITY <i>Patricia Adams</i>	DATE 11-3-09	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 
		DATE 2/24/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
191 The home shall educate the resident of his/her right to question or refuse a medication if he/she believes there may be a medication error. Documentation of this resident education shall be kept.	The home has not educated Resident #1 or Resident #2 on their right to refuse or question a medication if they believe there has been an error.	10/1/09	Elwyn Individual Rights and Responsibilities were updated to include resident right to refuse a medication. The form was reviewed and signed by all residents. The form will be used from this point forward. The unit manager will review charts on a monthly basis to ensure all DPW forms are completed.	 2/24/10

Nov. 5. 2009 10:01AM

VIOLATION REPORT PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME Elwyn - Rainbow House 64 East Old Baltimore Pike, Elwyn, PA 19063		CURRENT LICENSE NUMBER 122670
INSPECTION DATE(S) (Include all dates of the inspection) August 12, 2009		REGIONAL REPRESENTATIVE Leslie Erhardt, Christine McHale, Patricia Adams
SIGNATURE OF LEGAL ENTITY 	DATE 11-3-09	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION
		DATE 2/24/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (Include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
225c The resident shall have additional assessments as follows: (1) Annually.	Resident #1's most two recent assessments were not completed annually. The assessments were completed 9/18/2007 and 3/5/2009.	9/22/09	This issue will be reviewed by the Unit Director at the 9/22/09 staff meeting. It will be explained to staff re assessments and support plans must be completed 15-30 days from the MOSI. The Unit Director (Tom) and Unit manager (Christi) will review this issue individually with staff during clinical supervision on a monthly basis.	Steps have been taken to correct violation; full compliance is not verifiable 2/24/10 Date Initials (DPW)