

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to **ELWYN, INC.**

LEGAL ENTITY

To operate **ELWYN - FRIENDSHIP HALL**

NAME OF FACILITY OR AGENCY

Located at **66 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 **8**
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: 122890

Robert E. Robinson

ISSUING OFFICER

Kevin 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 04 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 – Friendship Hall
66 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

No. 6513 P. 4/52

NAME AND ADDRESS OF PERSONAL CARE HOME Elwyn - Friendship Hall 66 East Old Baltimore Pike, Elwyn, PA 19063		CURRENT LICENSE NUMBER 122890	
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 2/10/10

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
16c The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow 15 (relating to abuse reporting covered by law).	Resident #1 had a fall on 7/25/2009 and was treated at the emergency room for an injury sustained to the resident's head. The home did not report the incident to the Department.	9/24/09	This will be reviewed by the Unit Director with all STAFF AT THE 9/24/09 STAFF meeting. STAFF will be reminded that all reportable incidents will be completed with a DPW incident report. The Unit Manager will review all incidents that occur to ensure proper paperwork is completed in a timely manner.	<i>[Signature]</i> 2/24/10

Nov. 5. 2009 9:39AM

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

Nov. 5. 2009 9:40AM

NAME AND ADDRESS OF PERSONAL CARE HOME Elwyn - Friendship Hall 66 East Old Baltimore Pike, Elwyn, PA 19063		CURRENT LICENSE NUMBER 122890	
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. (3) The designated meeting	Staff person hired 6/10/2008, did not receive this orientation until 2/10/2009.	9/4/09	Orientation form will be completed 24 hours prior to or the 3rd day of work at the site. The Unit manager will review the form with staff to answer any questions the staff may have.	Steps have been taken to correct violation; full compliance is not verifiable 2/24/10 Date <i>[Signature]</i> Initials (DPW)

No. 6513 P. 8/52

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

Nov. 5. 2009 9:40AM

NAME AND ADDRESS OF PERSONAL CARE HOME Elwyn - Friendship Hall 66 East Old Baltimore Pike, Elwyn, PA 19063		CURRENT LICENSE NUMBER 122890	
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
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.				

No. 6513 P. 9/52

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

NAME AND ADDRESS OF PERSONAL CARE HOME Elwyn - Friendship Hall 66 East Old Baltimore Pike, Elwyn, PA 19063		CURRENT LICENSE NUMBER 122890
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 Monroe</i>	DATE 9/4/09	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Laura A. Kelmuth</i>
		DATE 11/2/09

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
82c Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.	Finger nail polish remover was found unlocked in resident room #2 with a label on it stating, "Harmful if ingested, in case of accidental ingestion give fluids liberally and consult with local poison control center."	10/1/09	All residents are being evaluated by Health Care Director to determine if they can safely use poisonous materials. This will be indicated on the support plan and assessment. If a resident is deemed unable to safely use or avoid poisonous products, then lock boxes shall be purchased for all residents of the home. Items have been removed in meantime.	Steps have been taken to correct violation; full compliance is not verifiable 2/24/10 Date Initials (DPW)

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

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Nov. 5. 2009 9:41AM

NAME AND ADDRESS OF PERSONAL CARE HOME Elwyn - Friendship Hall 66 East Old Baltimore Pike, Elwyn, PA 19063		CURRENT LICENSE NUMBER 122890	
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
141a The medical evaluation shall include the following: (5) Allergies. (6) Immunization history. (7) Medication regimen, - contraindicated medications, medication side effects and the ability to self-administer medications.	Resident #2's medical evaluation dated 10/27/2008 did not include the resident's allergies, immunizations, or medications. Repeat Violation - 6/24/08	8/13/09	The Unit Manager reviewed with ALL STAFF AT THE 8/13/09 STAFF MEETING THAT ALL RESIDENT MANS/MED EVALS MUST BE COMPLETELY FILLED OUT TO INCLUDE DATES OF IMMUNIZATION, LIST OF MEDICATION AND RESIDENT ALLERGY. MA-56+ MED EVALS WILL BE REVIEWED BY UNIT MANAGER MONTHLY TO ASSURE COMPLIANCE	<i>[Signature]</i> 2/24/10

No. 6513 P. 15/52

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

Nov. 5. 2009 9:42AM

NAME AND ADDRESS OF PERSONAL CARE HOME Elwyn - Friendship Hall 66 East Old Baltimore Pike, Elwyn, PA 19063		CURRENT LICENSE NUMBER 122890	
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 § 2800.	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 #3's medication administration record (MAR) did not include a diagnosis for the resident's Fosamax, Aspirin, Detrol, Relafen, or Potassium Chloride medications. -Resident #4's MAR did not include a diagnosis for the resident's Glucophage, Abilify, Effexor, Prilosec, or Fluocinonide medications.	8/12/09	Diagnosis was updated on all resident MAR's. This issue was addressed AT the 8/12/09 staff meeting. MAR's will include diagnosis from this point forward. The Pharmacy, who provides the MAR's was also notified. The MAR's will be reviewed weekly by a nurse or the unit manager.	 2/24/10

Nov. 5. 2009 9:42AM
No. 6513 P. 19/52

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

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Nov. 5, 2009 9:45AM

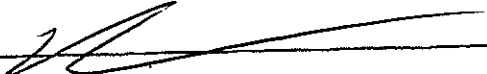
NAME AND ADDRESS OF PERSONAL CARE HOME Elwyn - Friendship Hall 66 East Old Baltimore Pike, Elwyn, PA 19063		CURRENT LICENSE NUMBER 122890
INSPECTION DATE(S) (include all dates of the inspection) August 12, 2009		REGIONAL REPRESENTATIVE Leslie Erhardt, Christine McHale, Patricia Adams
SIGNATURE OF LEGAL ENTITY <i>Patricia Adams</i>	DATE 11-3-09	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>
		DATE 2/24/10

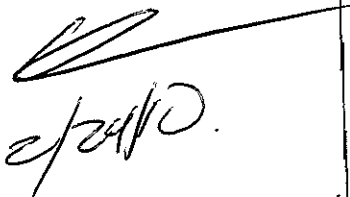
1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
187d The home shall follow the directions of the prescriber.	-Resident #3's Dulcolax 5mg medication was not available for this resident at the home. -Resident #4's Acetaminophen 325mg medication was not available for this resident at the home.	9/24/09	Medication had been ordered AT 7am on 8/12/09 and was received from the Pharmacy on that afternoon. The Unit Manager will review that all prescribed medications must be present and accounted for. This will be presented at the 9/24/09 staff meeting. Staff will be assigned to check in medications monthly prior to start of new med cycle.	Steps have been taken to correct violation; full compliance is not verifiable 2/24/10 Date Initials (DPW)

Nov. 5, 2009 9:45AM
No. 6513-P. 32/52

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

Nov. 5, 2009 9:46AM

NAME AND ADDRESS OF PERSONAL CARE HOME Etwyn - Friendship Hall 66 East Old Baltimore Pike, Etwyn, PA 19063		CURRENT LICENSE NUMBER 122890
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>Natasha Monroe</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 Residents #1 and #2 on their right to question or refuse a medication if they believe there has been an error.	10/1/09	Etwyn Individual Rights and Responsibilities were updated to include Residents 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.	


Nov. 6 5:13 PM '09

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

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Nov. 5, 2009 9:48AM

NAME AND ADDRESS OF PERSONAL CARE HOME Elwyn - Friendship Hall 66 East Old Baltimore Pike, Elwyn, PA 19063		CURRENT LICENSE NUMBER 122890
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
251c The home shall use standardized forms to record information in the resident's record.	The medical evaluation for Resident #2 dated 10/27/2008, is not completed on the form specified by the Department.	8/13/09	This issue was addressed with staff by the Unit Director at the 8/13/09 staff meeting. Staff were reminded that the DPW medical evaluation form must be completed in its entirety. The unit manager will review all resident M051 forms after the physical to ensure it is completed in its entirety.	Steps have been taken to correct violation; full compliance is not verifiable  Date _____ Initials (DPW) _____

No. 6513-P. 46/52

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

No. 6513 P. 50/52

NAME AND ADDRESS OF PERSONAL CARE HOME Elwyn - Friendship Hall 66 East Old Baltimore Pike, Elwyn, PA 19063		CURRENT LICENSE NUMBER 122890	
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
252 Each resident's record shall include the following information: (2) Race, height, weight, color of hair, color of eyes, religious affiliation, if any, and identifying marks.	-Resident #1's record does not include the resident's eye color. -Resident #2's does not include the resident's eye color.	9/13/09	Resident's Eye color was updated on Resident's missing Parsons Profile. This will be included on All Resident's missing Parsons Profiles. The Unit and ^{Unit} Manager will review All Profiles on a monthly Basis to ensure completed in Entirety.	<i>[Signature]</i> 2/24/10

Nov. 5. 2009 9:48AM