

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to MARTIN'S CARE HOME, INC.

LEGAL ENTITY

To operate MARTIN'S CARE HOME

NAME OF FACILITY OR AGENCY

Located at 522 WEST MAIN STREET, ROCKWOOD, PA 15557

(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 18
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 February 25, 2010 until February 25, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **321540**

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

FEB 25 2010

PHONE: (717) 783-3670

FAX: (717) 783-5662

Ms. Wendy A. Martin, Owner/Administrator
Martin's Care Home, Inc.
Martin's Care Home
522 West Main Street
Rockwood, Pennsylvania 15557

Dear Ms. Martin:

As a result of the Department of Public Welfare's licensing inspection on November 17, 2009 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

NAME AND ADDRESS OF PERSONAL CARE HOME Martin's Care Home, 522 West Main Street, Rockwood, PA 15557		CURRENT LICENSE NUMBER 321540	
INSPECTION DATE(S) (Include all dates of the inspection) 11/17/09		REGIONAL REPRESENTATIVE Lori Gensil and Diane Jones	
SIGNATURE OF LEGAL ENTITY <i>Wendy Maulik</i>	DATE 1/26/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Melinda E. Stan</i>	DATE 2/17/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	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
<p>42s 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.</p> <p align="right">PCH Division Central Region Field Office</p>	<p>The shared resident bedroom at the top of the steps to the left has an adult toileting chair. There is no privacy provided for use of this toileting chair.</p>	<p>11/18/2009</p>	<p>Adult Toileting Chair was only temporary. The chair was removed from room.</p> <p>Administrators will check all toileting chairs in home to ensure that there is privacy in each room, for ALL Toileting chairs.</p>	<p>MES 2/17/10</p>

FEB 17 2010

RECEIVED

VIOLATION REPORT
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SIGNATURE OF LEGAL ENTITY <i>Wendy Mallin</i>	DATE <i>11/26/10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>WES</i>	DATE <i>2/17/10</i>

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63a At least one staff person for every 50 residents who is trained in first aid and certified in obstructed airway techniques and cardiopulmonary resuscitation shall be present in the home at all times.	The home has a set staff schedule. The schedule has direct care staff member A working alone on Monday's 1P-8:30P, Wednesday's 1P-8:30P and Thursday's 1P-8:30P. Direct care staff member A is not trained in cardiopulmonary resuscitation.	<p align="center"><i>11/26/10</i> →</p> <p align="center"><i>ongoing</i> →</p>	<p><i>done</i> (administrator) I will be sure to have current cards (CPR, First Aid) before any person/employee is allowed to work in my home alone.</p> <p>→ I will do a biyearly check of all employee charts</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p><i>2/17/10</i> <i>WES</i> Date Initials (DPW)</p>

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85d Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.	There is an uncovered trash can located in the kitchen.	1/26/10 <u>done.</u> 2/28/10	I the administrator ^{created} made an employee check list, for the employees to check each shift I will check this list as well each week, to see that all tasks are being done / checked. She administrator will assign staff on each shift to check the trash cans in kitchens and bathrooms to ensure they are covered. MES 2/17/10	MES 2/17/10

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87 The home's rooms, hallways, interior stairs, outside steps, outside doorways, porches, ramps, evacuation routes, outside walkways and fire escapes shall be lighted and marked to ensure that residents, including those with vision impairments, can safely move through the home and safely evacuate.	The second floor hallway light for the interior stairway does not work. The stairway does not have sufficient lighting.	1/26/10	This was added to the employee check list, to check lights and hamps each day. The administrator will check each week as well. I'm sending a copy of my employee check list	<i>MES 2/17/10</i>

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101j5 Each resident shall have the following in the bedroom: A bedside table or a shelf.	There was no bedside table or shelf by the bed close to the window located in the shared resident bedroom by the front door.	11/25/09	<i>I the administrator added a shelf in this Resident's Room. I will cont. to check each room to see that all Residents have a bedside Shelf or Table. This something I will check.</i>	<i>MES 2/17/10</i>

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103e Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.	There was hamburger in a sandwich bag and pepperoni in a bag that was not labeled or dated located in the kitchen refrigerator.	<i>11/25/09</i> → <i>1/26/09</i> →	<i>I the administrator did do another service with staff on labeling and dating all food in Aug. I added this to my employee checklist. This is something that will be checked each day, each shift.</i>	<i>MES 2/17/10</i>

I also will check each week to ensure that they do this.

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103i Outdated or spoiled food or dented cans may not be used.	The following unlabeled/undated food items were located in the basement chest freezer: a bag of chicken pieces, three five pound beef roasts, four chunks of red meat and five one pound packages of hamburger.	11/18/09	<i>I called T deal Market to make sure they knew I had and date All meats we purchase from them. I will cont. to check all meats to see that they are labeled and dated.</i>	<i>MES 2/17/10</i>

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132b A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.	The home has not had a fire safety inspection in the last year. The most recent documented fire safety inspection was dated 2/24/07. Repeated violation- 10/10/08	<i>8/22/09</i> →	<i>I the administrator did have a fire safety inspection 8/22/09, by the fire chief, here is the letter from the fire chief of Rockwood.</i>	<i>MES 2/17/10</i>

But he did the inspection here is the new letter.

The Reason I was sighted he did not say in the first letter he did a fire safety inspection of my home he just said he did our drill.

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187a A medication record shall be kept to include the following for each resident for whom medications are administered: (1) Resident's name. (2) Drug allergies. (3) Name of medication. (4) Strength. (5) Dosage form. (6) Dose. (7) Route of administration. (8) Frequency of administration. (9) Administration times. (10) Duration of therapy, if applicable. (11) Special precautions, if applicable. (12) Diagnosis or purpose for the medication, including pro re nata (PRN). (13) Date and time of	Resident #2's <i>Senna Plus</i> tab 8.6 mg was located in the medication cart, but not listed on the medication administration record.	<i>11/18/2009</i> <i>1/26/10</i> <i>ongoing</i>	<i>Senna was just received as a PRN for maybelle</i> <i>I did add this to my employee checklist to check MAR and med cart daily.</i> <i>I administered</i> <i>I will also check weekly to ensure all meds are added to MAR..</i>	Steps have been taken to correct violation; full compliance is not verifiable <i>2/17/10</i> Date <i>MES</i> Initials (DPW)

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medication administration. (14) Name and initials of the staff person administering the medication.				