

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to ASBURY PLACE, INC.

LEGAL ENTITY

To operate ASBURY PLACE

NAME OF FACILITY OR AGENCY

Located at 760 BOWER HILL ROAD, PITTSBURGH, PA 15243

(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 42
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 42

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 29, 2010 until March 29, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 431550

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. Erica Gevaudan, Administrator
Asbury Place, Inc.
Asbury Place
760 Bower Hill Road
Pittsburgh, Pennsylvania 15243

Dear Ms. Gevaudan:

As a result of the Department of Public Welfare's licensing inspection on December 29, 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 Asbury Place, 760 Bower Hill Road, Pittsburgh, PA 15243		CURRENT LICENSE NUMBER 431550	
INSPECTION DATE(S) (Include all dates of the inspection) December 29, 2009		REGIONAL REPRESENTATIVE M. Glidden, C. Goedert	
SIGNATURE OF LEGAL ENTITY <i>Luca Mrazdan</i>	DATE 2-9-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Enda McFee (BPW)</i>	DATE 2/22/10

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
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.	<p>A bottle of antiseptic mouth wash was unlocked in resident room #210. The label indicated "if swallowed get medical help or contact a poison control center right away."</p> <p>A bottle of Listerine Antiseptic Rinse was unlocked in resident room #213. The label indicated "if swallowed, get medical help or contact a poison control center right away."</p> <p>A bottle of Selenium Sulfide 1% shampoo was unlocked in resident room #229. The label</p>	2-8-10	<p>Mouthwash removed from room 210.</p> <p>Listerine removed from Rm 213</p> <p>Selenium Sulfide 1% removed from Rm 229</p> <p>All other resident rooms checked for ^{substances within} poison label and if found removed.</p> <p>A letter (enclosed) sent to families asking that they not bring in anything with a poison warning label.</p> <p>Administrator/designee will complete rounds 3 times weekly</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>2/22/10 <i>MSG</i> Date Initials (BPW)</p>

to monitor HEMS in resident rooms.
(See attached "poison substance audit form")
(Continued next page)

Western Region

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

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NAME AND ADDRESS OF PERSONAL CARE HOME Asbury Place, 760 Bower Hill Road, Pittsburgh, PA 15243		CURRENT LICENSE NUMBER Adult Residential Licensing	
INSPECTION DATE(S) (Include all dates of the inspection) December 29, 2009	REGIONAL REPRESENTATIVE M. Girdden, C. Goedert		
SIGNATURE OF LEGAL ENTITY	DATE	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>BAM</i>	DATE 2/2/10

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
	indicated "if swallowed, get medical help or contact a poison control center right away."		Results of audit will be discussed during quality management meetings.	

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

Western Region

FEB 11 2010

NAME AND ADDRESS OF PERSONAL CARE HOME Asbury Place, 760 Bower Hill Road, Pittsburgh, PA 15243		CURRENT LICENSE NUMBER 431550 Adult Residential Licensing	
INSPECTION DATE(S) (Include all dates of the inspection) December 29, 2009		REGIONAL REPRESENTATIVE M. Glidden, C. Goedert	
SIGNATURE OF LEGAL ENTITY <i>Erica Giraudan</i>	DATE 2-9-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 2/22/10

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
36a The home shall have a first aid kit that includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers.	The first aid kit that was located in the utility closet did not include adhesive tape and tweezers.	12-29-09	This violation was corrected at time of inspection. Tweezers + tape were replaced. Attached First Aid Kit monitor will be completed monthly to ensure all proper items are maintained in the facility's first aid kit. Also enclosed is a photo of the first aid kit showing the tweezers + tape. Results of monthly monitor will be reviewed during Quality Mgmt. meetings.	2/22/10 MSG

Western Region

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

FEB 11 2010

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NAME AND ADDRESS OF PERSONAL CARE HOME Asbury Place, 760 Bower Hill Road, Pittsburgh, PA 15243		CURRENT LICENSE NUMBER Adult Residential Licensing	
INSPECTION DATE(S) (Include all dates of the inspection) December 29, 2009		REGIONAL REPRESENTATIVE M. Glidden, C. Goedert	
SIGNATURE OF LEGAL ENTITY <i>Lucia Swaudan</i>	DATE 2-9-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 2/22/10

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
121b Doors used for egress routes from rooms and from the building may not be equipped with key-locking devices, electronic card operated systems or other devices which prevent immediate egress of residents from the building, unless the home has written approval or a variance from the Department of Labor and Industry, the Department of Health or the appropriate local building authority.	① The two exit doors used as egress routes from the activity room enter into a courtyard that is enclosed by a fence with a padlock. ② The exit door to the main courtyard that is used as an egress route from the living room enters into a courtyard that is enclosed by a fence with a padlock.	2-9-10	① The doors leading to the courtyard remain locked on the facility's mag lock system. They open when the code is entered or upon activation of the fire alarm system. The padlock on the fence surrounding the courtyard has been removed. (see enclosed photo). Mt. Lebanon fire contacted for approval as fire exit (see attached email). Courtyard audit will be completed monthly to ensure immediate egress is allowed. (see attached). ② see next page	2/22/10 MSG

121 b continued

② re: main courtyard

Mount Lebanon Fire Department contacted to make a recommendation on this courtyard since our annual evacuation letter was due. (Per the 2010 evacuation letter (see enclosed) Mt. Lebanon fire department deems the main courtyard as a safe staging area due to the area being large enough to get a safe distance away from the facility. This will be assessed annually by Mt. Lebanon for continued usage of a staging area.

Also, in the annual letter Mt. Lebanon Fire mentions that staff should have access to key for padlock. Nurses + med techs have keys clearly marked for the gate + staff also have a key accessible to them.

Western Region

FEB 11 2010

Adult Residential Licensing

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

Western Region

NAME AND ADDRESS OF PERSONAL CARE HOME Esbury Place, 760 Bower Hill Road, Pittsburgh, PA 15243		FEB 11 2010 CURRENT LICENSE NUMBER 431550
INSPECTION DATE(S) (include all dates of the inspection) December 29, 2009		Adult Residential Licensing REGIONAL REPRESENTATIVE M. Glidden, C. Goedert
SIGNATURE OF LEGAL ENTITY <i>Erica Glidden</i>	DATE 2-9-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>
		DATE 2/27/10

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
83b Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.	Hydrocortisone 1% cream and Terbinafine Hydrochloride 1% cream was unlocked in the bathroom of resident room #212. Naphazoline Hydrochloride .012% eye drops and a bottle of Polyethylene Glycol .2% were unlocked on the window sill in resident room #329.	2-9-10	Hydrocortisone 1% cream & Terbinafine hydrochloride cream removed from Rm 212. Naphazoline hydrochloride eye drops removed from Rm 329. All other resident rooms checked for unlocked medications using unlocked medication & poison substance audit form (see attached). A letter has also been mailed to families on 2-4-10 advising them residents are not permitted to have such items in their room (see enclosed).	Steps have been taken to correct violation; full compliance is not verifiable 2/27/10 Date Initials (DPW) <i>MSG</i>

All resident rooms will be checked 3 times weekly by Administrator/designee and any unlocked medications found will be removed & documented on above mentioned audit form & secured properly. Results of audits to be discussed in Quality Mgmt. Meetings.

