

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to ELAN GARDENS, INC.

LEGAL ENTITY

To operate ELAN GARDENS

NAME OF FACILITY OR AGENCY

Located at 465 VENARD ROAD, CLARKS SUMMIT, PA 18411

(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

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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 75
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 27, 2010 until March 27, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 243750

Robert E. Robinson

ISSUING OFFICER

Kim 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. Ilise Rubinow, Administrator
Elan Gardens, Inc.
Élan Gardens
465 Venard Road
Clarks Summit, Pennsylvania 18411

Dear Ms. Rubinow:

As a result of the Department of Public Welfare's licensing inspection on January 12, 2010 and the corrections you have made after our inspection, we have found the above personal care home to be in compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes). Therefore, a regular license is being issued. Your license is enclosed.


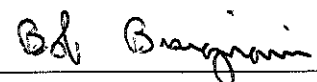
Sincerely,

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

Kevin T. Casey
Deputy Secretary

Enclosure
License
Violation Report


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

NAME AND ADDRESS OF PERSONAL CARE HOME Elan Gardens, 465 Venard Road, Clarks Summit, Pennsylvania 18411		CURRENT LICENSE NUMBER 243750	
INSPECTION DATE(S) (Include all dates of the inspection) January 12, 2010		REGIONAL REPRESENTATIVE Michele Moskalczyk, Anne Graziano	
SIGNATURE OF LEGAL ENTITY 	DATE 1/26/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 2/26/10

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>22a1 The following admission document shall be completed for each resident - Preadmission screening completed prior to admission on a form specified by the Department.</p> <p>224a A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.</p>	<p>The record for resident #1, admitted 12-16-09, did not contain a preadmission screening completed within 30 days prior to admission.</p> <p align="center"><i>Original</i></p> <p align="center">RECEIVED</p> <p align="center">JAN 28 2010</p>	1/26/2010	<p>Every resident who is admitted will have a pre-admission screening completed by the Director of Social Services. To ensure that this is done, the Director of Social Services and the RN Wellness Coordinator will review the document prior to the day of admission and will <u>each</u> keep a copy in their records.</p> <p>Exhibit # 1 shows the preadmission screening of the most recent admission.</p>	<p align="center"><i>OK</i></p> <p align="center">2-26-10</p>


SCRANTON FIELD OFFICE
Adult Residential Licensing

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<p>51 Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (OAPSA) (35 P.S. §§ 10225.101-10225.5102) and 6 Pa.Code Chapter 15 (protective services for older adults).</p> <p>52 Hiring, retention and utilization of staff persons shall be in accordance with the Older Adult Protective Services Act (35 P.S. §§ 10225.101—10225.5102) and 6 Pa.Code Chapter 15 (protective services for older adults) and other applicable regulations.</p>	<p>Employee A (date of hire 08/18/09) is a direct care employee who received confirmation of an FBI criminal background check from the PA Dept. of Aging, dated 12/29/09. This is beyond the 90 day provisional hiring period for retaining staff as required under the Older Adult Protective Services Act. The home did not have the documentation on file in the home until the date of inspection.</p>	<p>1/26/10</p>	<p>The Administrator is responsible for procuring the results of the FBI Background Check when it is needed. The Administrator will "tag" the payroll calendar for 60 days and for 90 days beyond the hire date as a reminder. If the FBI Background Check is not received by the administrator by the 90 days date, the employee will be laid off.</p>	<p>ADG. 2-26-10</p>


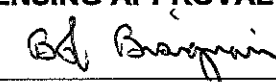
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65d Direct care staff persons hired after April 24, 2006 may not provide unsupervised ADL services until completion of the following: (2) Successful completion and passing the Department-approved direct care training course and passing of the competency test.	Direct care employee B (date of hire 08/31/09) did not complete the approved on-line direct care course and pass the competency test.	1/15/2010	All direct care staff persons will complete the approved on-line direct care course and pass the competency test prior to working with residents unsupervised unless they are a RN, LPN, or CNA licensed by the Commonwealth of PA. The staff person in question was a CNA as determined by the State of Illinois and subsequently this error occurred. The Quality Assurance nurses	2/26-10


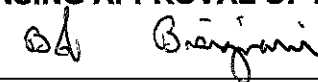
who train staff will be responsible for seeing that this violation does not recur.
See Exhibits # 2, 3, 4

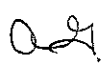
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105g-2 Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.	There was no documentation that the facilities large commercial dryer and several smaller dryers ever had the external duct work cleaned according to the manufacturer's instructions within the past year.	1/31/2010	Documentation will be kept that shows that the external ductwork for the clothes dryers have been cleaned. A Log sheet has been developed - see exhibit #5. Monthly cleanouts will continue to be done. The manufacturer's directions ^(EXHIBIT 6) for our dryers indicate the need for a cleanout every other year, but the cleanouts for our 7 dryers are done monthly to accommodate high usage and maximize safety. It will be the responsibility of the maintenance coordinator to complete the log each time he cleans out the external duct work.	RA 2-26-10

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252 Each resident's record shall include the following information: (10) A record of incident reports for the individual resident.	Copies of Incident reports filed with DPW on behalf of residents from 2009 to the current date are not being maintained in the resident records. Repeat violation - 01-20-09	1/26/10	All existing incident reports have been copied and placed in the corresponding resident chart. All future incident reports will be copied and placed in the corresponding resident chart by the RN Wellness Coordinator who is responsible for the completion of the incident report. In his absence, the QA nurse on duty will do the same. In order to prevent this violation from recurring, this item has been added to an existing audit. See Exhibit # 17.	 2-26-10

RECEIVED

JAN 28 2010

SCRANTON FIELD OFFICE
Adult Residential Licensing