

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to WOLF RUN VILLAGE LLC  
LEGAL ENTITY

To operate WOLF RUN VILLAGE  
NAME OF FACILITY OR AGENCY

Located at 3750 ROUTE 220 HIGHWAY, HUGHESVILLE, PA 17737  
(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 80  
(MAXIMUM CAPACITY)  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

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 5, 2010 until February 5, 2011,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 221490

*Robert E. Robinson*

ISSUING OFFICER

*Kevin J. 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 05 2010

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

Mr. Sterlyn D. May, President  
Wolf Run Village LLC  
5850 Main Road  
Hunlock Creek, Pennsylvania 18621

RE: Wolf Run Village  
3750 Route 220 Highway  
Hughesville, Pennsylvania 17737

Dear Mr. May:

As a result of the Department of Public Welfare's licensing inspection on January 25, 2010 of the above personal care home, we have found that your personal care home is in substantial compliance with the regulations, set forth in 55 Pa.Code Ch. 2600 (related to Personal Care Homes), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because this is a new legal entity operating the home.

In accordance with 55 Pa.Code § 2600.11(b) (relating to procedural requirements for licensure or approval of personal care homes) a re-inspection of your newly licensed personal care home will be conducted within 3 months of the effective date of this license. Complete compliance with all applicable regulations is required in order to maintain your license.

Your NEW 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**

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Wolf Run Village, 3750 Route 220 Highway, Hughesville, Pennsylvania 17737		<b>CURRENT LICENSE NUMBER</b>	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> January 25, 2010		<b>REGIONAL REPRESENTATIVE</b> Betty Bloch and Michele Moskalczyk	
<b>SIGNATURE OF LEGAL ENTITY</b> <i>Carol Smay</i>	<b>DATE</b> 2-4-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> <i>June C. Valence</i>	<b>DATE</b> 2-4-10

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
107c The home shall maintain at least a 3-day supply of nonperishable food and drinking water for residents.	The home did not have a minimum 3-day supply of drinking water for the three current residents of the home or a contract with a water company to deliver a three day supply in the case of an emergency.	Jan 26 2010	The facility is on a public water supply system. Administrator will maintain 1 gal per resident per day in the event of an emergency. Administrator has a contract with Tulpehocken Spring Water Co. to ensure that an ample supply of potable water for in case of emergency. Administrator will contact Hughesville Water Co. for an ample supply of potable water. Copy of Tulpehocken Inc is attached which indicates they will supply us immediately with a 3 day water supply.	DCV 2-4-10

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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Wolf Run Village, 3750 Route 220 Highway, Hughesville, Pennsylvania 17737		<b>CURRENT LICENSE NUMBER</b>	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> January 25, 2010		<b>REGIONAL REPRESENTATIVE</b> Betty Bloch and Michele Moskalczyk	
<b>SIGNATURE OF LEGAL ENTITY</b> <i>Carol May</i>	<b>DATE</b> <i>2-4-10</i>	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> <i>Doreen Valencia</i>	<b>DATE</b> <i>2-4-10</i>

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
107d The written emergency procedures shall be reviewed, updated and submitted annually to the municipal emergency management agency.	The home's written emergency procedures were not submitted to the municipal emergency management agency for review.	<i>2-1-10</i>	<i>On 2-1-10 by certified mail, the homes written emergency management procedures were submitted to the emergency director. Procedures will be updated and reviewed annually. Administrator has logged on calendar to ensure it will be submitted.</i>	<i>DCV 2-4-10</i>

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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Wolf Run Village, 3750 Route 220 Highway, Hughesville, Pennsylvania 17737		<b>CURRENT LICENSE NUMBER</b>	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> January 25, 2010		<b>REGIONAL REPRESENTATIVE</b> Betty Bloch and Michele Moskalczyk	
<b>SIGNATURE OF LEGAL ENTITY</b> <i>Carol May</i>	<b>DATE</b> 2-4-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> <i>June Valera</i>	<b>DATE</b> 2-4-10

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
124 The home shall notify the local fire department in writing of the address of the home, location of the bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.	The home did not notify the local fire department in writing of the address of the home, location of the bedrooms and the assistance needed, if any, to evacuate the building in an emergency.	Jan. 27-10	<i>Certified.</i> Letter was sent to local fire company on Jan 27 2010 was received on Jan 30, 2010 to notify fire department of our facility's address, location of bedrooms and blue print of facility.  Firechief did a walk thru on Jan 29, 2010 We provide fire company with current list of immobiles. If population changes we will notify by letter, the fire dept. of any changes.	<i>DAV</i> 2-4-10

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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Wolf Run Village, 3750 Route 220 Highway, Hughesville, Pennsylvania 17737		<b>CURRENT LICENSE NUMBER</b>	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> January 25, 2010		<b>REGIONAL REPRESENTATIVE</b> Betty Bloch and Michele Moskalczyk	
<b>SIGNATURE OF LEGAL ENTITY</b> <i>Carol Smay</i>	<b>DATE</b> <i>2-4-10</i>	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> <i>Dune Valence</i>	<b>DATE</b> <i>2-4-10</i>

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>130a There shall be an operable automatic smoke detector located within 15 feet of each bedroom door.</p> <p>130b The smoke detectors specified in 130a shall also be located in hallways.</p>	<p>The hallway smoke detectors for the following resident bedrooms were beyond the allowable 15' from the resident's bedroom doors:</p> <p>Bedroom # A11 was 17'            Bedroom # B11 was 15' 4"            Bedroom # C13 was 15' 4"            Bedroom # D2 was 16'</p>	<p><i>on Jan 26, 2010</i></p>	<p><i>Facility is a new home construction. Immediately after completion Furnessman elect. Co. came back and relocated 4 smoke detectors to be in the 15' compliance.</i></p>	<p><i>DCU 2-4-10</i></p>