

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to OAKWOOD RESIDENCE, LLC

LEGAL ENTITY

To operate OAKWOOD RESIDENCE

NAME OF FACILITY OR AGENCY

Located at 2109 RED LION ROAD, PHILADELPHIA, PA 19115

(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 89
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 May 24, 2010 until May 24, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 132560

Robert E. Robinson

ISSUING OFFICER

Kurt 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

MAY 21 2010

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

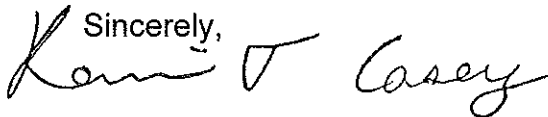
Mr. Colev J. Gestetner, Managing Member
Oakwood Residence
Oakwood Residence, LLC
2109 Red Lion Road
Philadelphia, Pennsylvania 19115

Dear Mr. Gestetner:

As a result of the Department of Public Welfare's licensing inspection on January 26, 2010 and January 27, 2010, 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.

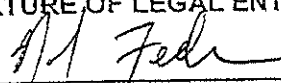
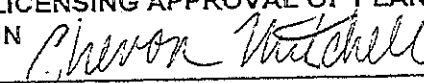
A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

Sincerely,


Kevin T. Casey
Deputy Secretary

Enclosures
Violation Report
License

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

NAME AND ADDRESS OF PERSONAL CARE HOME Oakwood Residence 2109 Red Lion Road, Philadelphia, PA 19115		CURRENT LICENSE NUMBER 132560	
INSPECTION DATE(S) (Include all dates of the inspection) January 26, 2010 and January 27, 2010		REGIONAL REPRESENTATIVE Patricia Adams, Leslie Erhardt and Jacob Herzing	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) Nochum Feder			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 5/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 5/7/10

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
22a3, 225a 22a3 The following admission document shall be completed for each resident - Personal care home assessment completed within 15 days after admission on a form specified by the Department. 225a A resident shall have a written initial assessment	Resident #1, admitted 12/24/09, had an assessment completed on 1/27/09.	4/27/10	Personal Care Assessments will be completed within 15 days of Admission. All necessary staff were re-educated to complete assessments within 15 days of admission. A monthly quality assurance program has been initiated to track and ensure timely assessments. Facility administration will monitor compliance.	5/11/10 ckm

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

NAME AND ADDRESS OF PERSONAL CARE HOME Oakwood Residence 2109 Red Lion Road, Philadelphia, PA 19115		CURRENT LICENSE NUMBER 132560	
INSPECTION DATE(S) (Include all dates of the inspection) January 26, 2010 and January 27, 2010		REGIONAL REPRESENTATIVE Patricia Adams, Leslie Erhardt and Jacob Herzing	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Not Feder</i>	DATE 5/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE 5/7/10

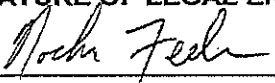
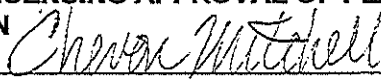
1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.				

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

NAME AND ADDRESS OF PERSONAL CARE HOME Oakwood Residence 2109 Red Lion Road, Philadelphia, PA 19115		CURRENT LICENSE NUMBER 132560	
INSPECTION DATE(S) (Include all dates of the inspection) January 26, 2010 and January 27, 2010		REGIONAL REPRESENTATIVE Patricia Adams, Leslie Erhardt and Jacob Herzing	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>John Feder</i>	DATE 5/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE 5/7/10

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
51, 52 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). 52 Hiring, retention and utilization of staff persons shall be in accordance with the Older Adult Protective	Criminal Background checks were not available for personnel providing services through a contracted home health care agency. Repeated – Violation 11/19/08.	4/27/10	Criminal background checks were immediately obtained for all contracted therapists from the home health care agency. All personnel employed or contracted by the home were reviewed to ensure they have criminal background checks. No personnel will be permitted to work at the home without a background check. All necessary staff were reeducated on obtaining background checks prior to employment. New employee files including contracted personnel will be reviewed monthly by the administrator to ensure compliance	5/12/10. cem

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

NAME AND ADDRESS OF PERSONAL CARE HOME Oakwood Residence 2109 Red Lion Road, Philadelphia, PA 19115		CURRENT LICENSE NUMBER 132560	
INSPECTION DATE(S) (Include all dates of the inspection) January 26, 2010 and January 27, 2010		REGIONAL REPRESENTATIVE Patricia Adams, Leslie Erhardt and Jacob Herzing	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 5/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 5/7/10

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
Services Act (35 P.S. §§ 10225.101—10225.5102) and 6 Pa.Code Chapter 15 (protective services for older adults) and other applicable regulations.				

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

NAME AND ADDRESS OF PERSONAL CARE HOME Oakwood Residence 2109 Red Lion Road, Philadelphia, PA 19115		CURRENT LICENSE NUMBER 132560	
INSPECTION DATE(S) (Include all dates of the inspection) January 26, 2010 and January 27, 2010		REGIONAL REPRESENTATIVE Patricia Adams, Leslie Erhardt and Jacob Herzing	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Mal Feder</i>	DATE 5/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Chermon Mitchell</i>	DATE 5/7/10

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
65b Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following: (1) Resident rights. (2) Emergency medical plan. (3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act. (4) Reporting of reportable incidents and conditions.	Direct care staff person A, hired 5/22/09, did not receive orientation on: (1) Resident rights. (2) Emergency medical plan. (3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act. (4) Reporting of reportable incidents and conditions.	4/27/10	Staff Person A was oriented on Resident rights, Emergency medical plan, Mandatory reporting of abuse and neglect under OAPSA and reporting of reportable incidents. All necessary staff were re-educated on the regulation requiring orientation of Resident Rights, Emergency Medical Plan, Mandatory reporting of abuse and neglect under OAPSA and reporting of reportable incidents during the first 40 hours of employment. Employee files were reviewed to ensure compliance. All new employee files will be reviewed monthly by the administrator	5/12/10 CEM

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

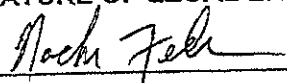
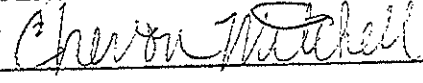
NAME AND ADDRESS OF PERSONAL CARE HOME Oakwood Residence 2109 Red Lion Road, Philadelphia, PA 19115		CURRENT LICENSE NUMBER 132560	
INSPECTION DATE(S) (Include all dates of the inspection) January 26, 2010 and January 27, 2010		REGIONAL REPRESENTATIVE Patricia Adams, Leslie Erhardt and Jacob Herzing	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Noah Feder</i>	DATE 5/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cherise Mitchell</i>	DATE 5/12/10

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.	Two bottles of Listerine mouthwash that stated, if swallowed "get help or contact a Poison Control Center," were observed on resident #1's bedside table. Resident #1 has not been assessed to safely use or avoid poisonous materials.	5/21/10	The 2 bottles of Listerine were immediately removed from Resident # 1's bedside table. All rooms were searched to ensure there are no poisonous materials. All residents are to be assessed to for safe use of poisonous materials. Letters were sent to all families advising them not to bring any poisonous items to residents without authorization from Administration. Administration will monitor rooms by weekly room checks. Staff have been instructed to remove any poisonous substances and have it brought to Administration.	Steps have been taken to correct violation; full compliance is not verifiable <i>CPW</i> Date: 5/12/10 Initials (DPW)

Direct Care Staff will check Resident Rooms Daily for poisonous materials. Any poisonous materials found will be locked up immediately. CPW 5/12/10

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

JAME AND ADDRESS OF PERSONAL CARE HOME Dakwood Residence 2109 Red Lion Road, Philadelphia, PA 19115		CURRENT LICENSE NUMBER 132560
INSPECTION DATE(S) (Include all dates of the inspection) January 26, 2010 and January 27, 2010	REGIONAL REPRESENTATIVE Patricia Adams, Leslie Erhardt and Jacob Herzing	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)		

SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 5/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 5/7/10
--	-----------------------	---	-----------------------

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
103f Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers shall be required in refrigerators and freezers.	The freezer in the activity room did not have a thermometer.	4/27/10	Thermometer was immediately placed into freezer in activity room freezer Staff was in-serviced on the necessity of having thermometers to ensure temperatures are in proper range. Weekly rounds by the administrator will be done to ensure compliance.	5/12/10 CRM

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

NAME AND ADDRESS OF PERSONAL CARE HOME Oakwood Residence 2109 Red Lion Road, Philadelphia, PA 19115		CURRENT LICENSE NUMBER 132560	
INSPECTION DATE(S) (Include all dates of the inspection) January 26, 2010 and January 27, 2010		REGIONAL REPRESENTATIVE Patricia Adams, Leslie Erhardt and Jacob Herzing	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Noah Fein</i>	DATE 5/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE 5/7/10

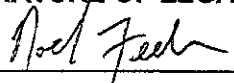
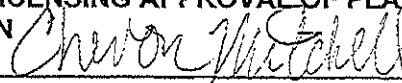
1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
183f Prescription medications, OTC medications and CAM that are discontinued, expired or for residents who are no longer served at the home shall be destroyed in a safe manner according to the Department of Environmental Protection and Federal and State regulations. When a resident permanently leaves the home, the resident's medications shall be given to the resident, the designated person, if any, or the person or entity taking responsibility for the new placement on the day of departure from the home.	- A tube of Preparation H Cream Hydrocortisone 1% with an expiration date of 6/02 was on a shelf above the dresser in room #207. - Trazodone 50 mg tablets were found in the medication cart for resident #2. This medication was discontinued for this resident on 7/17/09.	4/27/10	Expired tube of Preparation H Cream Hydrocortisone 1% was immediately removed from room 207. Discontinued Trazodone 50 mg tablets resident # 2 were immediately removed from medication cart. All necessary staff were re-educated on proper disposal of expired and discontinued medications. Weekly room checks will be done by Administration to ensure there are no expired medications /creams in resident's possession. Medication carts will be audited monthly to ensure compliance.	Steps have been taken to correct violation; full compliance is not verifiable 5/12/10 <i>CM</i> Date Initials (DPW)

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

NAME AND ADDRESS OF PERSONAL CARE HOME Oakwood Residence 2109 Red Lion Road, Philadelphia, PA 19115		CURRENT LICENSE NUMBER 132560	
INSPECTION DATE(S) (Include all dates of the inspection) January 26, 2010 and January 27, 2010		REGIONAL REPRESENTATIVE Patricia Adams, Leslie Erhardt and Jacob Herzing	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Neil Feder</i>	DATE 5/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cherion Mitchell</i>	DATE 5/7/10

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
187d The home shall follow the directions of the prescriber.	<ul style="list-style-type: none"> - Resident #2 had an order for Acetaminophen 325 mg tablets as needed. The medication was not available for administration on 1/27/10. - Resident #3 had an order for Levin 0.125 mg SL as needed. The medication was not available for administration on 1/27/10. - Resident #4 had an order for Acetaminophen 325 mg tablets as needed. The medication was not available for administration on 1/27/10. - Resident #5 had orders for Milk 	4/27/10	Resident # 2 's order for Acetaminophen 325 mg tablets was immediately ordered and received. Resident # 3's order for Levsin 0.125 mg SL was immediately ordered and received. Resident # 4's order for Acetaminophen 325 mg tablets was immediately ordered and received. Resident # 5's order for Milk of Magnesia, Pink Besmuth Liquid and Acetaminophen 325 mg tablets was immediately ordered and received. Nursing staff was re-educated on ensuring orders directed by prescriber are followed.	<p align="center">Steps have been taken to correct violation; full compliance is not verifiable</p> <p align="center">Date <u>5/12/10</u> Initials (DPW) <u>LRM</u></p>

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

NAME AND ADDRESS OF PERSONAL CARE HOME Oakwood Residence 2109 Red Lion Road, Philadelphia, PA 19115		CURRENT LICENSE NUMBER 132560	
INSPECTION DATE(S) (Include all dates of the inspection) January 26, 2010 and January 27, 2010		REGIONAL REPRESENTATIVE Patricia Adams, Leslie Erhardt and Jacob Herzing	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 5/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 5/7/10

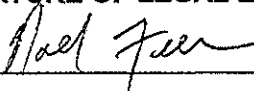
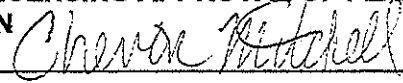
1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
	of Magnesia, Pink Bismuth Liquid and Acetaminophen 325 mg tablets as needed. The medications were not available for administration on 1/27/10. Repeated – Violation 11/19/08		Pharmacy will provide a list of PRNs monthly. Nursing Staff will audit all PRNs weekly. Any PRN meds that need to be refilled will be reordered <i>immediately</i> DON will monitor PRN audit <i>monthly</i>	

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

NAME AND ADDRESS OF PERSONAL CARE HOME Oakwood Residence 2109 Red Lion Road, Philadelphia, PA 19115		CURRENT LICENSE NUMBER 132560	
INSPECTION DATE(S) (Include all dates of the inspection) January 26, 2010 and January 27, 2010		REGIONAL REPRESENTATIVE Patricia Adams, Leslie Erhardt and Jacob Herzing	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>[Signature]</i>		DATE 5/15/10	REGIONAL LICENSING APPROVAL OF PLAN, OF CORRECTION <i>[Signature]</i>
			DATE 5/7/10

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
227c The support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment.	Resident #6 uses an enabler as an assistive device. The resident's support plan dated 12/2/09 did not address the use of this enabler.	4/27/10	Resident # 6's support plan was updated to address the use of an enabler. Support plans will be revised as needed when there are changes in the resident's needs. Necessary staff were re-educated on the need to revise support plans upon changes in the resident's needs. Administration will review support plans when there are possible changes in the resident's needs to ensure compliance.	Steps have been taken to correct violation; full compliance is not verifiable <i>[Signature]</i> Date: 5/12/10 Initials (DPW): <i>[Signature]</i>

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

NAME AND ADDRESS OF PERSONAL CARE HOME Oakwood Residence 2109 Red Lion Road, Philadelphia, PA 19115		CURRENT LICENSE NUMBER 132560		
INSPECTION DATE(S) (Include all dates of the inspection) January 26, 2010 and January 27, 2010		REGIONAL REPRESENTATIVE Patricia Adams, Leslie Erhardt and Jacob Herzing		
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)				
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 		DATE 5/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 5/7/10

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
251b The entries in a resident's record shall be permanent, legible, dated and signed by the staff person making the entry.	White out was used on resident #1's contract to alter the date. The contract is now dated 12/7/09.	4/27/10	Whiteout was used by a family member while completing the admission agreement. Staff were be instructed that resident's record must be permanent, legible, dated, and signed by staff person making entry. Administrator will review admission agreements upon any admission to ensure compliance of permanent entries in the resident's record.	5/12/10 CEM