

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to NHS PENNSYLVANIA
LEGAL ENTITY

To operate PEIFFERS LANE PERSONAL CARE HOME
NAME OF FACILITY OR AGENCY

Located at 1460 PEIFFERS LANE, STEELTON, PA 17113
(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 5
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 26, 2010 until March 26, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 310360

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.



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
PO BOX 2675
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

MAR 26 2010

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

Mr. Michael J. Breslin, COO
NHS Pennsylvania
4391 Sturbridge Drive
Harrisburg, Pennsylvania 17110

RE: Peiffers Lane Personal Care Home
1460 Peiffers Lane
Steelton, Pennsylvania 17113

Dear Mr. Breslin:

As a result of the Department of Public Welfare's licensing inspection on 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.

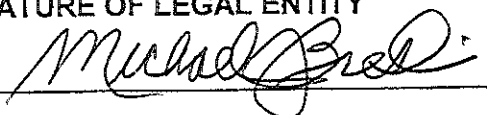
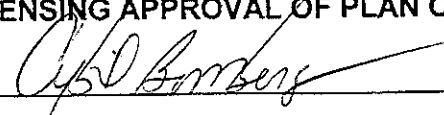
Sincerely,


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

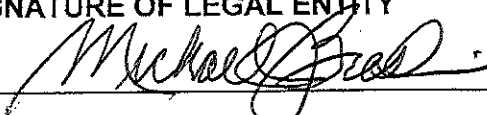

NAME AND ADDRESS OF PERSONAL CARE HOME Peiffers Lane Personal Care Home 1460 Peiffers Lane Steelton, PA 17113		CURRENT LICENSE NUMBER 310360	
INSPECTION DATE(S) (Include all dates of the inspection) January 27, 2010		REGIONAL REPRESENTATIVE John Bungo and Jamie Erb	
SIGNATURE OF LEGAL ENTITY 	DATE 2/22/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 3/15/10


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
22a2 and 141 a-1 22a2 The following admission document shall be completed for each resident - Medical evaluation completed 60 days prior to or 30 days after admission on a form specified by the Department. And 141a-1 A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission.	Resident No. 1 admitted on 4/3/09 did not have a medical evaluation on the required form. PCH Division Central Region Field Office	① 1/29/2010 ② 3/30/2010 2/1/2010	Immediate: ① Administrator informed Nursing Supervisor (NS) of the form violation. Nursing Supervisor to review charts for each resident and note if any chart will need to have the form updated. ② NS will include new form for No. 1's next scheduled visit to PCP for update. Ongoing: The administrator inspected the master form book to be certain that the form is up to date and the outdated form has been and continues to be replaced. At the release of new forms, the administrator will instruct the NS to replace new forms in the master form book. NS will train staff to look for updated form. The administrator will review the policy at monthly staff meetings.	Steps have been taken to correct violation; full compliance is not verifiable  Date: 3/15/10 Initials (DPW)

FEB 25 2010
RECEIVED

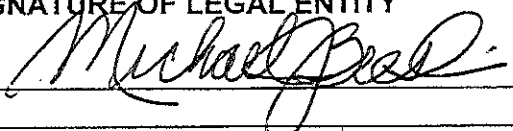
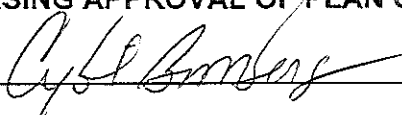
Medical evaluations will review upon receipt by the Administrator or designee to ensure that the correct form has been used and that they are complete. CS 3/15/10

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

NAME AND ADDRESS OF PERSONAL CARE HOME Peiffers Lane Personal Care Home 1460 Peiffers Lane Steelton, PA 17113		CURRENT LICENSE NUMBER 310360	
INSPECTION DATE(S) (Include all dates of the inspection) January 27, 2010		REGIONAL REPRESENTATIVE John Bungo and Jamie Erb	
SIGNATURE OF LEGAL ENTITY 	DATE 2/22/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 3/5/10

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
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 last annual fire drill with a fire-safety expert was conducted on 1/14/09.	① 1/28/2010 ② 2/2/2010 2/2/2010	Immediate: ① Administrator contacted K. Kroh of DPW to get a ruling so that the NHS employed Fire Safety Expert will meet the requirements of this regulation. The administrator received notification from K. Kroh of DPW on February 9, 2010 that our fire safety person is not qualified to be that fire safety expert without further training. ② Swatara Township fire safety expert performed needed inspection and fire drill. Documentation provided in the letter dated February 4, 2010—see attached. Ongoing: Administrator reviewed regulation 132b with in house safety expert. November 1, 2010 in house safety expert will contact Swatara Safety expert to schedule the inspection/fire drill in a timely manner and provide documentation. Microsoft Outlook is to be utilized as a reminder to contact Swatara safety expert.	3/15/10 

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

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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.	Resident No. 1 was to receive 8 units of Lantus 1000/ML if the blood sugar reading is more than 120. On 1/24/10 it was documented that his/her reading was 130 at 7:30 pm per the glucometer check and weekly control log. However, the MAR was not initialed to confirm that the injection was given. It is not known whether the injection was given.	1/28/2010 1/28/2010	Immediate: The Nurse initialed the appropriate date on the MAR because the medication was given as ordered. Ongoing: The administrator instituted protocols that will have nurse/Med Tech. informed of an error on MAR when the error is discovered so they can correct the error in a timely manner. The policy is to be reviewed at monthly staff meetings conducted by the administrator.	Steps have been taken to correct violation; full compliance is not verifiable <u>3/15/10</u> <i>OB</i> Date Initials (DPW)