

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to LEGACY AT BRISTOL, INC.

LEGAL ENTITY

To operate LEGACY GARDENS OF BRISTOL

NAME OF FACILITY OR AGENCY

Located at 2022 BATH ROAD, BRISTOL, PA 19007

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

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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 26
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 April 20, 2010 until April 20, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **131080**

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

APR 21 2010

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

Ms. Lisa Sofia, VP Operations
Legacy at Bristol, Inc.
8301 Roosevelt Boulevard
Philadelphia, Pennsylvania 19152

RE: Legacy Gardens of Bristol
2022 Bath Road
Bristol, Pennsylvania 19007

Dear Ms. Sofia:

As a result of the Department of Public Welfare's licensing inspection on February 12, 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 Legacy Gardens of Bristol 2022 Bath Road, Bristol, PA - 19007		CURRENT LICENSE NUMBER 131081	
INSPECTION DATE(S) (Include all dates of the inspection) February 12, 2010		REGIONAL REPRESENTATIVE Christine McHale and Jacob Herzing	
SIGNATURE OF LEGAL ENTITY <i>Sherry Sturkey</i>	DATE 3/9/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 3/23/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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>22a3, 225a</p> <p>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.</p> <p>225a A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The</p>	<p>Resident #1's medical evaluation dated 6/8/09 states that the resident is unable to move from one location to another without full physical assistance from others. The resident's most recent assessment dated 3/30/09 states that the resident is mobile with the use of a walker.</p>	<p>5/19/10</p>	<p>Physician has been notified and will make the correction. Ongoing - our current audit form has a place to check for completeness of the medical evaluation to be certain all areas are filled in. We have now added a check for the accuracy of the information given. (Copy attached)</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p><i>4/1/10</i> <i>SBH/</i> Date Initials (DPW)</p>

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administrator or designee, or a human service agency may complete the initial assessment.				Steps have been taken to correct violation; full compliance is not verifiable 4/1/10 <i>[Signature]</i> Date Initials (DPW)

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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.	A bottle of scrubbing bubbles cleaner labeled "Contact Poison Control Center if ingested" was found unlocked in the activity closet in the home. Not all of the residents of the home are assessed to safely use or avoid poisonous materials.	2/12/10	Bottle removed from closet. All staff have been in serviced on this regulation (82c). Documentation of this unservice is attached.	Steps have been taken to correct violation; full compliance is not verifiable <hr/> Date: _____ Initials (DPW): _____ <i>July verified</i> <i>2/85/09</i>

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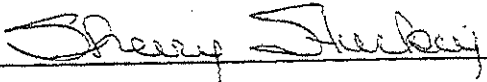

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96a The home shall have a first aid kit that includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers.	The home's first aid kit did not contain eye coverings.	2/12/10	eye covering was included in the first aid kit, however, it was messed by the inspectors and myself. Photos attached.	4/1/10 SB/DP

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102i A dispenser with soap shall be provided within reach of each bathroom sink. Bar soap is not permitted unless there is a separate bar clearly labeled for each resident who shares a bathroom.	An unlabeled bar of soap was found on the bathtub in the "tub room" across from resident room #18.	2/12/10	All staff have been in serviced on this regulation (102i) Documentation is enclosed. Also a sign is posted in the tub room as a reminder to everyone (Copy attached) In addition, the night staff assignment now includes checking common bathrooms for any personal items and removing items if found.	4/1/10 SBS/dh

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102k Use of a common towel is prohibited.	Three unlabeled mesh body sponges were found hanging from the grab bar to the left of the faucet for the bathtub were found in the tub room across from resident room #18.	2/12/10	Mesh body sponges have been removed. All staff have been in-serviced regarding this regulation (102k) Documentation attached. Also as previous, we have a sign posted in the tub room as a reminder to all.	4/1/10 SBS/DPW

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103g Food shall be stored in closed or sealed containers.	An unsealed bag of onions, peppers and tomatoes was found in the refrigerator in the home's common area kitchen.	3/8/2010	Unsealed bag was removed. We have contacted our food service representative regarding this violation. He has ordered us containers appropriate for freezer use.	4/1/10 SBS/A

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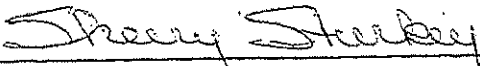

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103i Outdated or spoiled food or dented cans may not be used.	<ul style="list-style-type: none"> - A bag of 3 bunches of celery that were browning and rotting and 4 peppers that were rotting were found in the drawers of the refrigerator in the home's common area kitchen. - Boneless ribs that were wrapped in plastic were found unlabeled and undated in the freezer in the home's common area kitchen. - A bag of sliced turkey was found unlabeled and undated in the refrigerator in the home's common area kitchen. 	3/8/10	<p>The food service representative has ordered labels appropriate for freezer use (they will not fall off.)</p> <p>Dietary staff will replace fresh vegetables every 2 weeks as the food order is delivered.</p>	<p>4/1/10</p> <p>585/a</p>

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105g-1 To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.	One-eighth of the surface of the lint trap of the dryer located on the right in the laundry room across the hall from the door labeled "attic access" was covered with lint.	2/15/10	Signs are now posted in each laundry room, on every dryer reminding staff to empty the lint traps after every use.	4/1/10 SBS/A

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183b 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.	The home's medication closet containing all of the resident's medications was unlocked and unattended for 20 minutes at approximately 10:30 am on the day of the inspection.	2/12/10	Staff on duty at this time was counseled. She was assisting residents with medications when a resident called for help. Not seeing her coworkers, she went to check on the resident. Upon returning she was stopped by a resident's family. ALL medication staff have been reminded that the doors to the med. area MUST be locked if they leave the area.	4/1/10 505/D

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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.	Resident #2's Isosorbide Mononitrate 30 mg expired on 1/6/10.	2-15-10	The Director of Resident Care has created a monthly check with expiration dates of all medications not issued by the facility pharmacy listed.	4/1/10 SBS/PA

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187b The information in subsections 187a13 and 187a14 shall be recorded at the time the medication is administered.	- Staff failed to initial Resident #2's medication administration record when administering Carvedilol 12.5 mg and Bacitracin 500 gm ointment on 2/7/10 at 9:00 pm.	2-15-10	Medication person from each shift will audit the medication records to ensure all medications given are signed out. A copy is attached.	4/1/10 SBS/A