

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to LUTHERCARE

LEGAL ENTITY

To operate SPANG CREST MANOR

NAME OF FACILITY OR AGENCY

Located at 945 DUKE STREET, LEBANON, PA 17042

(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 18
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 18

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 10, 2010 until March 10, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **320840**

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

MAR 10 2010

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

Mr. Carl McAloose, President/CEO
LutherCare
600 East Main Street
Lititz, Pennsylvania 17543

RE: Spang Crest Manor
945 Duke Street
Lebanon, Pennsylvania 17042

Dear Mr. McAloose:

As a result of the Department of Public Welfare's licensing inspection on February 16, 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 Spang Crest Manor, 945 Duke Street, Lebanon, PA 17042		CURRENT LICENSE NUMBER 320840
INSPECTION DATE(S) (Include all dates of the inspection) 2/16/10		REGIONAL REPRESENTATIVE Lori Gensil
SIGNATURE OF LEGAL ENTITY <i>L. Yauman LPN / PCHA</i>	DATE 3/1/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Schuler</i>
		DATE 3/4/10

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
85d Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.	There were two uncovered trash cans located under the sink in the kitchen on the secured unit.	2/24/10	<ul style="list-style-type: none"> • a small trash can with a lid was purchased on 2/22/10 and placed under kitchen sink. (see invoice) • all other trash cans in AL will be checked for proper coverage. • Staff education was provided on 2/24/10. (see attached) • PCHA will monitor for compliance quarterly for one year. 	Mes 3/4/10

MAR 2 2010

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

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INSPECTION DATE(S) (Include all dates of the inspection) 2/16/10		REGIONAL REPRESENTATIVE Lori Gensil	
SIGNATURE OF LEGAL ENTITY <i>L. Mauman LPA/PCHA</i>	DATE 3/1/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>MES</i>	DATE 3/4/10

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
101j7 Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on/off at bedside.	Resident bedroom #1 did not have a bedside lamp.	2/24/10	<ul style="list-style-type: none"> • Bedroom #1 now has an operable bedside lamp. • Room audit was completed on 2/17/10 for lamp/light sources at all bedsides. An additional lamp was purchased for residents use in room # 4. • Will place on "admission checklist" for further compliance on new admits. (see attached) Staff education was provided. • PCHA will monitor for further compliance quarterly for one year. 	MES 3/4/10

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

NAME AND ADDRESS OF PERSONAL CARE HOME Spang Crest Manor, 945 Duke Street, Lebanon, PA 17042		CURRENT LICENSE NUMBER 320840
INSPECTION DATE(S) (Include all dates of the inspection) 2/16/10		REGIONAL REPRESENTATIVE Lori Gensil
SIGNATURE OF LEGAL ENTITY <i>L. Gauman / PCHA</i>	DATE 3/1/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>MES</i>
		DATE 3/4/10

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
123b Copies of the emergency procedures 107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.	The home does not post the emergency procedures.	2/24/10	<ul style="list-style-type: none"> • On 2/16/10, a copy of our "emergency procedures" was put in a binder at the nurses desk in a conspicuous / public place. • Staff education was provided on 2/24/10 (see attached) • PCHA will monitor that book remains at a conspicuous / public place quarterly for one year. 	<p align="center">Steps have been taken to correct violation; full compliance is not verifiable</p> <p align="center">Date <u>3/4/10</u> Initials <u>MES</u> (DPW)</p>