

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to T.A. RAHM

LEGAL ENTITY

To operate FAIRFIELD PERSONAL CARE HOME

NAME OF FACILITY OR AGENCY

Located at 27 KYLE AVENUE, FAIRCHANCE, PA 15436

(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 8
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 5, 2010 until May 5, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 404450

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

MAY 07 2010

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

Mr. T.A. Rahm, Owner/Administrator
Fairfield Personal Care Home
27 Kyle Avenue
Fairchance, Pennsylvania 15436

Dear Mr. Rahm:

As a result of the Department of Public Welfare's licensing inspection on March 19, 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
CARE HOMES – 55 Pa.Code Chapter 2600


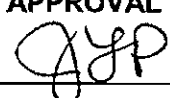
Western Region

NAME AND ADDRESS OF PERSONAL CARE HOME Fairfield Personal Care Home 27 Kyle Avenue, Fairchance, PA 15436		CURRENT LICENSE NUMBER Adult Residential Licensing 404450	
INSPECTION DATE(S) (Include all dates of the inspection) 03/19/2010		REGIONAL REPRESENTATIVE N. Mandock	
SIGNATURE OF LEGAL ENTITY	DATE	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 4-15-10

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
services provided by the home.				

VIOLATION REPORT
CARE HOMES – 55 Pa.Code Chapter 2600

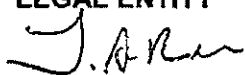
Western Region

NAME AND ADDRESS OF PERSONAL CARE HOME Fairfield Personal Care Home 27 Kyle Avenue, Fairchance, PA 15436		CURRENT LICENSE NUMBER 404450	
INSPECTION DATE(S) (Include all dates of the inspection) 03/19/2010		REGIONAL REPRESENTATIVE N. Mandock	
SIGNATURE OF LEGAL ENTITY 	DATE 4-5-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 4-15-10

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
(4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101—10225.5102). (5) Falls and accident prevention. (6) New population groups that are being served at the home that were not previously served, if applicable.				

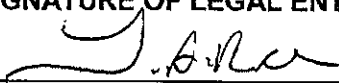
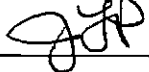
VIOLATION REPORT
CARE HOMES – 55 Pa.Code Chapter 2600

Western Region

NAME AND ADDRESS OF PERSONAL CARE HOME Fairfield Personal Care Home 27 Kyle Avenue, Fairchance, PA 15436		CURRENT LICENSE NUMBER 404450 Adult Residential Licensing	
INSPECTION DATE(S) (Include all dates of the inspection) 03/19/2010		REGIONAL REPRESENTATIVE N. Mandock	
SIGNATURE OF LEGAL ENTITY 	DATE 4-5-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE

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
101e Ceiling height in each bedroom shall be an average of at least 7 feet.	The ceiling height in resident bedroom #3 measures 6'10".	Waiver Filed 7-1-10	This Bedroom has been used for housing 2 of the 8 residents since our opening in 1998. We were unaware that the room measured only 6'10" as the room is so spacious & airy (See attached photos) The POA of each resident has written to request that the resident be allowed to stay in that room. There is no way to increase the height of that ceiling, so denial of the waiver will cause us to have to relocate the 2 residents creating a hardship as each resident has enjoyed living here 3 + 5 years respectively. The home will request a waiver for the use of the identified room. If the waiver is denied residents will be moved to a different room or relocated as needed 4-15-10 JPP	


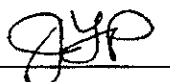
VIOLATION REPORT
CARE HOMES – 55 Pa.Code Chapter 2600

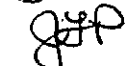
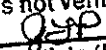
NAME AND ADDRESS OF PERSONAL CARE HOME Fairfield Personal Care Home 27 Kyle Avenue, Fairchance, PA 15436		CURRENT LICENSE NUMBER Adult Residential Licensing 464450g	
INSPECTION DATE(S) (Include all dates of the inspection) 03/19/2010		REGIONAL REPRESENTATIVE N. Mandock	
SIGNATURE OF LEGAL ENTITY 	DATE 4-5-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 4-15-10

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
101j6 Each resident shall have the following in the bedroom: A mirror.	Resident bedroom #4 had only one mirror. This bedroom is shared by three residents.	3/20/10 5/00/10	Well mirror has been hung to accommodate 3 rd resident. Administrator will inspect resident bedrooms one time per month to ensure all required furniture, including mirrors, are present in the rooms. 4-15-10 JJP	4-15-10 JJP

VIOLATION REPORT
CARE HOMES – 55 Pa.Code Chapter 2600

Western Region

NAME AND ADDRESS OF PERSONAL CARE HOME Fairfield Personal Care Home 27 Kyle Avenue, Fairchance, PA 15436		CURRENT LICENSE NUMBER Adult Residential Licensing 404450	
INSPECTION DATE(S) (Include all dates of the inspection) 03/19/2010		REGIONAL REPRESENTATIVE N. Mandock	
SIGNATURE OF LEGAL ENTITY 	DATE 3-20-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 4-15-10

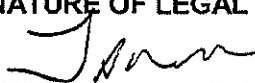
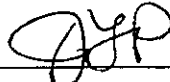
1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
132c A written fire drill record shall include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.	The home's fire drill records for the period 02/20/09 through 02/15/10 do not specify the exact evacuation times for the residents. These times were rounded off to two minutes except for the months of 07/09 and 11/09.	3-20-10 5-30-10	Will write down the <u>exact</u> minutes + seconds on all fire drills The administrator will review the fire drill log monthly to ensure all required information is documented correctly including the time of evacuation in exact minutes and seconds. 4-15-10 	Steps have been taken to correct violation; full compliance is not verifiable 4-15-10  Date Initials (DPW)


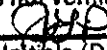
VIOLATION REPORT
CARE HOMES – 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME Fairfield Personal Care Home 27 Kyle Avenue, Fairchance, PA 15436		Adult Residential Licensing 404450	CURRENT LICENSE NUMBER 404450
INSPECTION DATE(S) (Include all dates of the inspection) 03/19/2010		REGIONAL REPRESENTATIVE N. Mandock	
SIGNATURE OF LEGAL ENTITY <i>JAN</i>	DATE 4-5-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>JYP</i>	DATE 4-15-10


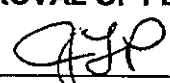
1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
141a-2 The medical evaluation shall include the following: (4) Special health or dietary needs of the resident.	The medical evaluation for resident #1, dated 09/15/09, did not include the dietary needs of the resident.	3-22-10 5-30-10	Form was taken to Dr. [redacted] she filled in the blank & initialed it. Will check form more carefully in future. Copy Enclosed The administrator will review all current resident's records to ensure that the medical evaluation is current and all areas are completed. If any area is left blank the administrator will return the medical evaluation to the physician to be completed. 4-15-10 <i>JYP</i>	4-15-10 <i>JYP</i>

VIOLATION REPORT
CARE HOMES – 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME Fairfield Personal Care Home 27 Kyle Avenue, Fairchance, PA 15436		Adult Residential Licensing 404450	CURRENT LICENSE NUMBER
INSPECTION DATE(S) (Include all dates of the inspection) 03/19/2010		REGIONAL REPRESENTATIVE N. Mandock	
SIGNATURE OF LEGAL ENTITY 	DATE 4-5-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 4-15-10

1	2	3	4	5
REGULATION 55 Pa.Code § 2600.	VIOLATION	DATE BY WHICH CORRECTION WILL BE COMPLETED	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)	DATE COMPLIANCE VERIFIED BY DPW
141b-1 A resident shall have a medical evaluation at least annually.	The most recent medical evaluation for resident #2 was dated 02/02/09.	3-22-10 5-30-10	Medical Evaluation has been updated. Will keep a master sheet on Evaluations for DR. Copy Enclosed. The administrator will review all current resident's medical evaluations to ensure they are up to date and all areas are completed. 4-15-10 	Steps have been taken to correct violation; full compliance is not verifiable 4-15-10 Date  Initials (DPW)

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


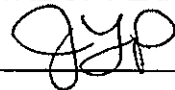
NAME AND ADDRESS OF PERSONAL CARE HOME Fairfield Personal Care Home 27 Kyle Avenue, Fairchance, PA 15436		Adult Residential Licensing 404450	CURRENT LICENSE NUMBER
INSPECTION DATE(S) (Include all dates of the inspection) 03/19/2010		REGIONAL REPRESENTATIVE N. Mandock	
SIGNATURE OF LEGAL ENTITY 	DATE 4-5-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 4-15-10

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
191 The home shall educate the resident of his/her right to question or refuse a medication if he/she believes there may be a medication error. Documentation of this resident education shall be kept.	Resident #1, admitted 03/12/09, was not educated of his/her right to question or refuse medication if the resident believes there may be a medication error.	3/22/10 5-30-10	Assessment has been completed Resident was educated on Right to Refuse on 3/22/10 Will do when all new residents are admitted. Copy Enclosed. The Administrator will review all current resident's records to ensure all residents have documentation indicating they had been educated on the right to	4-15-10 JJP

question or refuse a medication if he/she believes there may be a medication error. 4-15-10 JJP

VIOLATION REPORT
CARE HOMES – 55 Pa.Code Chapter 2600

Western Region
 Page 13 of 13

NAME AND ADDRESS OF PERSONAL CARE HOME Fairfield Personal Care Home 27 Kyle Avenue, Fairchance, PA 15436		CURRENT LICENSE NUMBER 404450	
INSPECTION DATE(S) (Include all dates of the inspection) 03/19/2010		REGIONAL REPRESENTATIVE N. Mandock	
SIGNATURE OF LEGAL ENTITY 	DATE 4-5-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 4-15-10

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
252 Each resident's record shall include the following information: (3) A photograph of the resident that is no more than 2 years old.	Per staff person A, the administrator, the photographs of the residents are undated in all of the home's residents' records.	3/25/10	All Photos of Residents have been updated & have the dates posted on them. Will keep a master list/Expiration sheet.	4-15-10 JJP