

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to LEEDS HEALTH CARE SERVICES, INC.

LEGAL ENTITY

To operate NOTTINGHAM VILLAGE RETIREMENT CENTER

NAME OF FACILITY OR AGENCY

Located at 60 NEITZ ROAD, NORTHUMBERLAND, PA 17857

(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 90
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 25, 2011 until April 25, 2012,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 202130

Robert E. Robinson

ISSUING OFFICER

R. C. King

DIRECTOR

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 - 01/11



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

ADULT RESIDENTIAL LICENSING

APR 26 2011

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

Mr. Frederick D. Kessler, President
Leeds Health Care Services, Inc.
Strawbridge Road, PO Box 32
Northumberland, Pennsylvania 17857

RE: Nottingham Village Retirement Center
60 Neitz Road
Northumberland, Pennsylvania 17857

Dear Mr. Kessler:

As a result of the Department of Public Welfare's licensing inspection on April 5, 2011, and the corrections you have made after our inspection, we have found the above personal care home to be in compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes). Therefore, a regular license is being issued. Your license is enclosed.


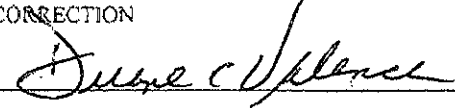
Sincerely,

A handwritten signature in black ink, appearing to read 'R. Melusky', with a long horizontal flourish extending to the right.

Ronald Melusky
Acting Director

Enclosures
License
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME NOTTINGHAM VILLAGE RETIREMENT CENTER, 60 NEITZ ROAD NORTHUMBERLAND, PA 17857		CURRENT LICENSE NUMBER 202130	
INSPECTION DATES (include all dates of the inspection) 04/03/2011		REGIONAL REPRESENTATIVE Ann O'Haire, Ryan Novak	
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 	DATE 4/18/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 4-20-11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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
187a A medication record shall be kept to include the following for each resident for whom medications are administered: (1) Resident's name. (2) Drug allergies. (3) Name of medication. (4) Strength. (5) Dosage form. (6) Dose. (7) Route of administration. (8) Frequency of administration. (9) Administration times. (10) Duration of therapy, if applicable. (11) Special	The home did not have a diagnosis for Resident # 1 following medications: 1. Triple antibiotic ointment/ use as label directs may keep bed side . 2. Chloresptic liquid/ use as label directs / may keep at bedside and self administer. 3. Calcium antiaacid E-S tabs same as Tums EX tablets / use as directed by label 4. Biscotix 10 mg suppositories / use as directed on the label . May keep at bedside and self administer. 5. Phazme soft gel caps 125 mg, take as directed on label. May keep at bedside and may self adminster .	April 7, 2011 April 15, 2011 April 15, 2011	See attachment #1 dx secured for listed medication Staff training on dx requirements (see attachment #2) Weekly audit form created. Audit will be done by personal care supervisor or designee. Audit is to determine if that all components are present on the MAR. Audit will continue till October 31, 2011 (see attachment #3)	DCV 4-20-11

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

NAME AND ADDRESS OF PERSONAL CARE HOME NOTTINGHAM VILLAGE RETIREMENT CENTER, 60 NEITZ ROAD NORTHUMBERLAND, PA 17857		CURRENT LICENSE NUMBER 202130	
INSPECTION DATES (Include all dates of the inspection) 04/05/2011		REGIONAL REPRESENTATIVE Ann O'Haire, Ryan Novak	
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 <i>Frank D. Kersch</i>	DATE 4/18/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Juene C. Valence</i>	DATE 4-20-11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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
precautions, if applicable. (12) Diagnosis or purpose for the medication, including pro re nata (PRN). (13) Date and time of medication administration. (14) Name and initials of the staff person administering the medication.		April 15, 2011	Audit will provide supervisor the need for additional 1:1 training sessions QA meeting minutes changed to reflect addition of above audit needed (see attachment #4)	See previous page 1 of 2.