

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to CHRIST THE KING MANOR, INC.  
LEGAL ENTITY

To operate CHRIST THE KING MANOR  
NAME OF FACILITY OR AGENCY

Located at 1100 WEST LONG AVENUE, DUBOIS, PA 15801  
(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 60  
(MAXIMUM CAPACITY)  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 20

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 June 3, 2010 until June 3, 2011,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 300070

Robert E. Robinson  
ISSUING OFFICER

Ken 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

JUN 04 2010

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

Mr. Samuel Zaffuto, CEO  
Christ the King Manor, Inc.  
P.O. Box 448  
Dubois, Pennsylvania 15801

RE: Christ the King Manor  
1100 West Long Avenue  
Dubois, Pennsylvania 15801

Dear Mr. Zaffuto:

As a result of the Department of Public Welfare's licensing inspection on April 5, 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.

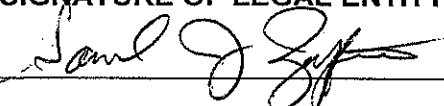

Sincerely,

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**

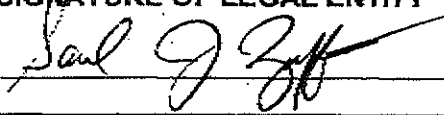
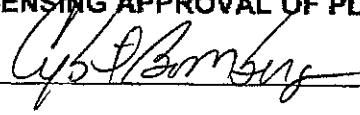
<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Christ the King Manor, 1100 West Long Avenue, DuBois, PA 15801		<b>CURRENT LICENSE NUMBER</b> 300070	
<b>INSPECTION DATE(S)</b> (Include all dates of the inspection) 4-5-10		<b>REGIONAL REPRESENTATIVE</b> D. Jones, L. Loudenslager	
<b>SIGNATURE OF LEGAL ENTITY</b> 	<b>DATE</b> 4-22-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 	<b>DATE</b> 5/25/10

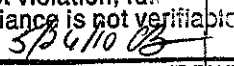
1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
51, 52 51 Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (OAPSA) (35 P.S. §§ 10225.101-10225.5102) and 6 Pa.Code Chapter 15 (protective services for older adults). 52 Hiring, retention and utilization of staff persons shall be in accordance with the Older Adult Protective Services Act (35 P.S. §§ 10225.101—10225.5102) and 6 Pa.Code Chapter 15 (protective services for older adults) and other applicable regulations.	Direct care staff person, A, hired on 5-7-09, has not lived in Pennsylvania for the past two years. An FBI background check was done and approved; however, a PA state police background check has not been completed.	04-06-2010	A criminal background check was completed on 04-06-2010 with no criminal record in Pennsylvania.  The Administrator will ensure that all staff members hired will have a criminal background check.  <i>The administrator will review the personnel records of all new staff hired to ensure the requirements of OAPSA are met and documentation is contained within the records - CB 5/25/10</i>	<i>5/25/10 CB</i>

APR 28 2010

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

Page 2 of 10

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Christ the King Manor, 1100 West Long Avenue, DuBois, PA 15801		<b>CURRENT LICENSE NUMBER</b> 300070	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> 4-5-10		<b>REGIONAL REPRESENTATIVE</b> D. Jones, L. Loudenslager	
<b>SIGNATURE OF LEGAL ENTITY</b> 	<b>DATE</b> 5-26-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 	<b>DATE</b> 5/26/10

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
54a Direct care staff persons shall have the following qualifications:  (1) Be 18 years of age or older (exception – 54b). (2) Have a high school diploma, GED diploma or active registry status on the Pennsylvania nurse aide registry. (3) Be free from a medical condition, including drug or alcohol addiction that would limit the staff person from providing necessary personal care services with reasonable skill and safety.	Direct care staff person, A, hired on 5-7-09, earned a non-USA diploma and is not on the active Pennsylvania nurse aide registry. A waiver has not been submitted.	5-26-10	5/25/10 The direct care staff person in question is in the process of obtaining her certification and added to the active Pennsylvania nurse aid registry. Her educational requirements required by the Dept. of Education have been approved and she will be scheduled for testing in June. After our discussion regarding this matter and being informed that the direct care staff person was not to be actively working, the staff member has been removed from our direct care staff schedule and will remain off the active work schedule until her certification has been approved. In the future, verification of direct care staff qualifications will be done prior to employment to ensure	Steps have been taken to correct violation; full compliance is not verifiable. Date: 5/26/10 Initials (DPW): 

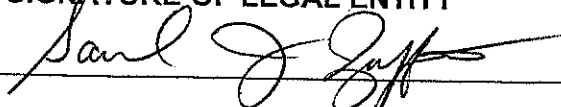
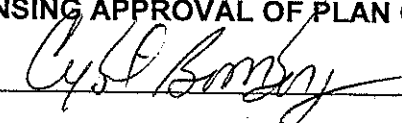
that the person meets the requirements of the Department of Public Welfare.

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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Christ the King Manor, 1100 West Long Avenue, DuBois, PA 15801		<b>CURRENT LICENSE NUMBER</b> 300070	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> 4-5-10		<b>REGIONAL REPRESENTATIVE</b> D. Jones, L. Loudenslager	
<b>SIGNATURE OF LEGAL ENTITY</b> <i>Saul J. Zuff</i>	<b>DATE</b> 4-22-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> <i>C. J. B. [Signature]</i>	<b>DATE</b> 5/25/10

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>65a Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following:</p> <p>(1) Evacuation procedures. (2) Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable. (3) The designated meeting place outside the building or within the fire-safe area in the event of an actual fire. (4) Smoking safety procedures,</p>	<p>Direct care staff person, B, hired on 11-17-09, did not complete the fire safety training until 2-9-10, more than 2 months after the date of hire.</p>	04-20-10	<p>Discussed with direct care staff person B. States it was completed on day of hire 11-17-09 and completed and turned in by 11-20-09. However, unable to locate check list. A new check list was completed with the appropriate dates the orientation was completed on and placed in staff person's record.</p> <p>The administrator will ensure that all training materials will be turned into the office and placed in the appropriate staff persons record.</p> <p><i>The administrator will review the record of each new staff person hired within 2 weeks after hire to ensure the records are complete and all required training has been completed. 5/25/10</i></p>	<p>Steps have been taken to correct violation; full compliance is not verified. <i>5/25/10</i> Date Initials (DPW)</p>

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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Christ the King Manor, 1100 West Long Avenue, DuBois, PA 15801		<b>CURRENT LICENSE NUMBER</b> 300070	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> 4-5-10		<b>REGIONAL REPRESENTATIVE</b> D. Jones, L. Loudenslager	
<b>SIGNATURE OF LEGAL ENTITY</b> 	<b>DATE</b> 4-22-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 	<b>DATE</b> 5/25/10

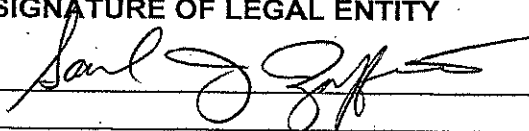
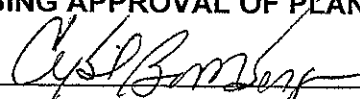
1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
the home's smoking policy and location of smoking areas, if applicable. (5) The location and use of fire extinguishers. (6) Smoke detectors and fire alarms. (7) Telephone use and notification of emergency services.			<u>Correct</u>	

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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Christ the King Manor, 1100 West Long Avenue, DuBois, PA 15801		<b>CURRENT LICENSE NUMBER</b> 300070	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> 4-5-10		<b>REGIONAL REPRESENTATIVE</b> D. Jones, L. Loudenslager	
<b>SIGNATURE OF LEGAL ENTITY</b> <i>Paul J. Ziff*</i>	<b>DATE</b> 4-22-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> <i>Cybil Borsley</i>	<b>DATE</b> 5/25/10

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>65b Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following:</p> <p>(1) Resident rights. (2) Emergency medical plan. (3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act. (4) Reporting of reportable incidents and conditions.</p>	<p>Direct care staff person, B, hired on 11-17-09, did not complete the required trainings until 2-9-10.</p>	<p>04-20-10</p>	<p>Discussed with direct care staff person B. States it was completed on day of hire 11-17-09 and completed and turned in by 11-20-09. However, unable to locate check list.</p> <p>A new check list was completed with the appropriate dates the orientation was completed and placed in staff person's record.</p> <p>The administrator will ensure that all training materials will be turned into the office and placed in the appropriate staff person's record.</p> <p><i>The administrator will review the records of each new staff person hired within 2 weeks of hire to ensure the records are complete and that all required training has been completed. 5/25/10</i></p>	<p>Steps have been taken to correct violation; full compliance is not verified.</p> <p><i>5/25/10</i> Date Initials (DPW)</p>

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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Christ the King Manor, 1100 West Long Avenue, DuBois, PA 15801		<b>CURRENT LICENSE NUMBER</b> 300070	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> 4-5-10		<b>REGIONAL REPRESENTATIVE</b> D. Jones, L. Loudenslager	
<b>SIGNATURE OF LEGAL ENTITY</b> 	<b>DATE</b> 4-22-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 	<b>DATE</b> 5/25/10

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
130b The smoke detectors specified in 130a shall also be located in hallways.	Rooms 615 and 616 of the Alzheimer's unit did not have a smoke detector within 15 feet of the bedroom door. The closest smoke detector measured 17.6 feet away.	04-05-10  06-10-10	<p>During on site inspection, a battery operated smoke detector was placed within 15 feet of the bedroom door.</p> <p>Maintenance is in the process of working on relocating the current smoke detector that is interconnected to our fire safety system.</p> <p>Until the smoke detector is connected to the system, the administrator will check the smoke detector monthly to ensure the battery is working properly.</p>	<i>5/25/10 CB</i>

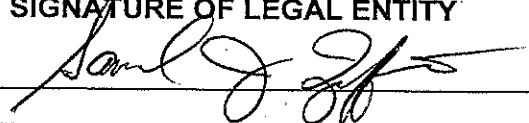




**VIOLATION REPORT**  
**PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Christ the King Manor, 1100 West Long Avenue, DuBois, PA 15801		<b>CURRENT LICENSE NUMBER</b> 300070	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> 4-5-10		<b>REGIONAL REPRESENTATIVE</b> D. Jones, L. Loudenslager	
<b>SIGNATURE OF LEGAL ENTITY</b> <i>Saul Zeff</i>	<b>DATE</b> 4-27-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> <i>Cybil Bamberger</i>	<b>DATE</b> 5/25/10

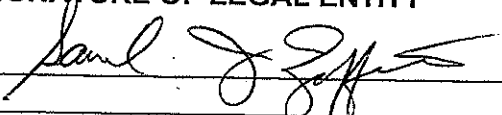

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
141a-2 The medical evaluation shall include the following:  (1) A general physical examination by a physician, physician's assistant or nurse practitioner. (2) Medical diagnosis including physical or mental disabilities of the resident, if any. (3) Medical information pertinent to diagnosis and treatment in case of an emergency. (4) Special health or dietary needs of the resident.	<ul style="list-style-type: none"> <li>The medical evaluation, dated 1-20-10, for Resident 1 reads 'see list' under the Medication section. There is no list attached.</li> <li>The medical evaluation, dated 9-21-09, for Resident 2 indicates a list of medications is attached. The attached list has a print date of 9-8-09 and is not dated by the physician.</li> <li>The medical evaluation, dated 11-13-09, for Resident 3 reads 'see orders' under the Medication section. The attached 'orders' are dated 11-12-09.</li> </ul>	04-20-10	<p>The administrator will ensure that all medical evaluations that indicate "see list or see orders" will be dated and signed by the physician the same day the medical evaluation is completed.</p> <p><i>Each medical evaluation will be reviewed by the administrator or designee upon receipt. Incomplete medical evaluations will be returned to the physician for completion.</i></p> <p align="right">13 5/25/10</p>	<p>Steps have been taken to correct violation; full compliance is not verified.</p> <p align="center">5/25/10 <i>CB</i></p> <p>Date Initials (DPW)</p>


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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Christ the King Manor, 1100 West Long Avenue, DuBois, PA 15801		<b>CURRENT LICENSE NUMBER</b> 300070	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> 4-5-10		<b>REGIONAL REPRESENTATIVE</b> D. Jones, L. Loudenslager	
<b>SIGNATURE OF LEGAL ENTITY</b> 	<b>DATE</b> 4-22-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 	<b>DATE</b> 5/25/10

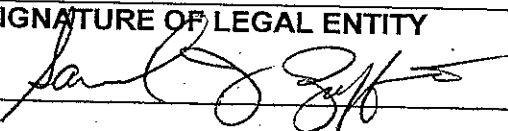
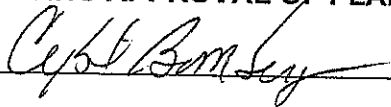
1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
187a A medication record shall be kept to include the following for each resident for whom medications are administered:  (3) Name of medication. (4) Strength. (5) Dosage form. (6) Dose. (7) Route of administration. 13) Date and time of medication administration. (14) Name and initials of the staff person administering the medication.	Direct care staff person, C, administered medications on 4-3-10 and 4-4-10, but did not sign, print, or initial the MAR master key.	04-20-10	Direct care staff person C was inserviced on 04-05-10 on policy of using the MAR master key.  The administrator also inserviced all other med staff starting on 04-05-10 and completed on 04-20-10 on the policy of using the MAR master key.  All med persons state understanding on signing the master key the first day of the month of administering medications.	

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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Christ the King Manor, 1100 West Long Avenue, DuBois, PA 15801		<b>CURRENT LICENSE NUMBER</b> 300070	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> 4-5-10		<b>REGIONAL REPRESENTATIVE</b> D. Jones, L. Loudenslager	
<b>SIGNATURE OF LEGAL ENTITY</b> 	<b>DATE</b> 4-22-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 	<b>DATE</b> 5/25/10

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
231h The resident-home contract in 25 shall also include a disclosure of services, admission and discharge criteria, change in condition policies, special programming and costs and fees.	The resident-home contracts for those served in the Secured Dementia Care Unit (SDU) did not address the following requirements: <ul style="list-style-type: none"> <li>The contracts do not include the specific services provided, the admission/ discharge criteria, and special programming for the residents with dementia.</li> <li>The contracts incorrectly state that the support plan must be completed within 30 days, not within 72 hours.</li> <li>The contracts indicate that each resident's medical</li> </ul>	04-20-10  05-20-10	The resident home contract for the secured dementia care unit has been revised to meet the requested criteria "see attached".  All residents/families of the secured dementia unit will be advised of this revision by an addendum. A signed copy will then be attached to the resident home contract on file.	5/25/10 

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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Christ the King Manor, 1100 West Long Avenue, DuBois, PA 15801		<b>CURRENT LICENSE NUMBER</b> 300070	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> 4-5-10		<b>REGIONAL REPRESENTATIVE</b> D. Jones, L. Loudenslager	
<b>SIGNATURE OF LEGAL ENTITY</b> 	<b>DATE</b> 4-22-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 	<b>DATE</b> 5/25/10

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>evaluation may be completed not only within 60 days prior to admission, but also within 30 days after admission, not within 60 days prior to admission, as required.</p> <ul style="list-style-type: none"> <li>There is no mention in the contracts indicating that a preadmission cognitive screening must be completed within 72 hours prior to admission.</li> </ul>		<p align="right"><i>Contd</i></p>	