

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to LUCINDA AND RANDALL JEWART

LEGAL ENTITY

To operate JEWART'S WHISPERING PINES MANOR

NAME OF FACILITY OR AGENCY

Located at P.O. BOX 249, 8 WEST CHURCH ST. SAGAMORE, PA. 16250

(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 24, 2010 until May 24, 2011,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 426850

*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 21 2010

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

Ms. Lucinda Jewart, Administrator  
Lucinda and Randall Jewart  
Jewart's Whispering Pines Manor  
PO Box 166, 8 West Church Street  
Sagamore, Pennsylvania 16250

Dear Ms. Jewart:

As a result of the Department of Public Welfare's licensing inspection on April 6, 2010 and May 10, 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.

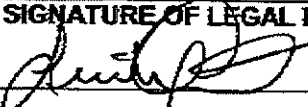
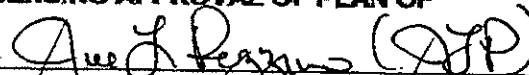
A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

Sincerely,  
Handwritten signature of Kevin T. Casey in cursive script.

Kevin T. Casey  
Deputy Secretary

Enclosures  
License  
Violation Report

**Western Region**  
**PERSONAL CARE HOMES - 55 Pa. Code Chapter 2600**

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Jewart's Whispering Pines Manor P.O. Box 166, 8 West Church Street, Sagamore, PA 16250	APR 28 2010  Adult Residential Licensing	<b>CURRENT LICENSE NUMBER</b>  426850	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b>  04/06/2010	<b>REGIONAL REPRESENTATIVE</b>  N. Mandock, T. Newman		
<b>PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)</b>			
<b>SIGNATURE OF LEGAL ENTITY REPRESENTATIVE</b> 	<b>DATE</b> 4-26-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b>  (JLP)	<b>DATE</b> 5-12-10

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
3c The personal care home shall post the current license, a copy of the current Violation Report (VR) issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.	A copy of the current violation report was not posted in a public and conspicuous place or anywhere in the home.	4-26-10	All violation reports will be posted - or on hand.  The administrator will monitor weekly to ensure the home's current violation report is posted. 4-29-10 JLP	JLP 5-12-10



P. 02

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APR-28-2010 10:33 AM LUCINDA, JEWART

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

**Western Region**  
 APR 28 2010  
 Adult Residential Licensing

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Jewart's Whispering Pines Manor P.O. Box 166, 8 West Church Street, Sagamore, PA 16250		<b>CURRENT LICENSE NUMBER</b> 426850
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		<b>DATE</b> 5-12-10

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89b Hot water temperature in areas accessible to the resident may not exceed 120°F.	The hot water temperature in the first floor shared resident bathroom read 124.8 degrees Fahrenheit.	4-6-10	Hot water tank was turned down + will be monitored regularly The administrator will check hot water temperatures 1x per week to ensure the temperature does not exceed 120°F. 4-29-10 JYP	5-12-10 JYP

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

**Western Region**

APR 28 2010

Adult Residential Licensing

**CURRENT LICENSE NUMBER**

426850

**REGIONAL REPRESENTATIVE**

N. Mandock, T. Newman

**NAME AND ADDRESS OF PERSONAL CARE HOME**

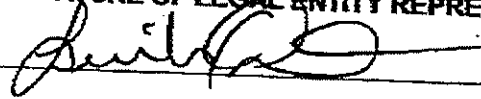
Jewart's Whispering Pines Manor  
P.O. Box 166, 8 West Church Street, Sagamore, PA 16250

**INSPECTION DATE(S) (include all dates of the inspection)**

04/06/2010

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**SIGNATURE OF LEGAL ENTITY REPRESENTATIVE**



**DATE**

4-26-10

**REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION**



**DATE**

5-12-10

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.	The second floor resident bedroom shared by three male residents contained only one mirror.	4-6-10	Second mirror <u>was</u> installed and will monitor to make sure it is kept here. I was not aware a mirror one was required	5-12-10 JJP

In the future if a resident shares a bedroom with other residents, the mirror may be shared with one other resident.

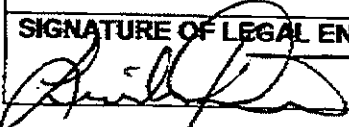
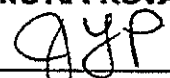
4-29-10  
JJP

**Western Region**

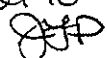
APR 28 2010 Page 4 of 18

Adult Resident CURRENT LICENSE NUMBER  
428850


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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Jewart's Whispering Pines Manor P.O. Box 166, 8 West Church Street, Sagamore, PA 16250		<b>REGIONAL REPRESENTATIVE</b> N. Mandock, T. Newman	
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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.	There was no liquid soap in the soap dispenser located in the first floor shared resident bathroom.	4-6-10	Soap was put in dispenser while inspector was here. I will monitor more  A designated staff person on each shift will inspect bathrooms 1x per shift to ensure soap is available to wash hands.	5-12-10 JJP

4-29-10  


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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Jewart's Whispering Pines Manor P.O. Box 166, 8 West Church Street, Sagamore, PA 16250		<b>Western Region</b>		<b>CURRENT LICENSE NUMBER</b> 426850	
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103e Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.	The home's refrigerator contained the following leftover foods which were unlabeled and undated: hard-boiled eggs and beets, a portion of ham, a pan of gelatin dessert, and a partial pie.	4-26-10	Items will be labeled + dated will monitor Daily By Administrator Items listed were disposed of.	5-12-10 gyp

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

**Western Region**

APR 28 2010

Adult Residential Lic 426850

**NAME AND ADDRESS OF PERSONAL CARE HOME**  
 Jewart's Whispering Pines Manor  
 P.O. Box 166, 8 West Church Street, Sagamore, PA 16250

**INSPECTION DATE(S) (Include all dates of the inspection)**  
 04/06/2010



**REGIONAL REPRESENTATIVE**  
 N. Mandock, T. Newman

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<b>SIGNATURE OF LEGAL ENTITY REPRESENTATIVE</b> 	<b>DATE</b> 6-26-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> JYP	<b>DATE</b> 5-18-10
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103i Outdated or spoiled food or dented cans may not be used.	The freezer compartment of the home's kitchen refrigerator/freezer contained the following foods which were not in original packaging and were not labeled and dated when frozen: a package of ground meat, and a leftover ham bone.	4-26-10  5-30-10	Items in freezer will also be marked + date labeled. will monitor daily The mentioned items will be discarded immediately. All items will be labeled and dated when placed into the freezer. Staff will be educated on this regulation and documentation will be kept. 4-29-10 JYP	5-18-10 JYP

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


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**Western Region**  
 APR 9 2 2010  
 Adult Residential Licensing

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107c The home shall maintain at least a 3-day supply of nonperishable food and drinking water for residents.	The home's contract letter from an outside water provider indicated that a three day supply of water would be provided to the home within 24 hrs in the event of a disruption of regular water service. The home does not maintain a 3 day supply of water.	4-7-10  4-29-10	Have obtained new contract w/ restaurant.  A new contract letter from an outside water provider was obtained. A copy will be kept for inspector's review. 4-29-10 JJP	5-12-10 JJP



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

**Western Region**  
 APR 28 2010  
 Adult Residential

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Jewart's Whispering Pines Manor P.O. Box 166, 8 West Church Street, Sagamore, PA 16250		<b>CURRENT LICENSE NUMBER</b> 426850	
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			<b>DATE</b> 5-12-10

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109b Cats and dogs present at the home shall have a current rabies vaccination. A current certificate of rabies vaccination from a licensed veterinarian shall be kept.	The home lacked a current rabies vaccination for the German Shepard dog, Freedom, which was chained in the yard outside the home and was accessible to residents.	4-30-10  5-30-10	Dog will have current rabies vaccination. And will make sure shot records are kept. The administrator will ask the veterinarian to send them a reminder in advance of when the rabies shots are next due. Any cat or dog living at or visiting the home will have a current rabies vaccination. JYP 4-29-10	5-12-10 JYP

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


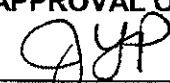
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**Western Region**  
 APR 9 8 2010  
 Adult Residential Licensing

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121a Stairways, hallways, doorways, passageways and egress routes from rooms and from the building shall be unobstructed and unobstructed.	The landing of the interior stairway by the home's front door was partially blocked by two boxes of disposable adult briefs and an "Easy Vac" rug cleaner.	4-6-10	All said items were removed we had just got a delivery, we were cleaning when inspectors arrived all items will be kept off stairway. The administrator will do daily rounds of the home to ensure all stairway, hallway, doorway, passageway and egress routes from the building are unobstructed. 4-29-10 JJP	Steps have been taken to correct violation; full compliance is not verifiable 5-12-10 JJP Date Initials (DPW)

APR-28-2010 10:41 AM LUCINDA.JEWART 7:24 7857049 P.03


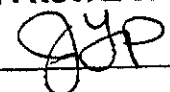
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122 Unless otherwise regulated by the Department of Labor and Industry, the Department of Health or the appropriate local building authority, all buildings shall have at least two independent and accessible exits from every floor, arranged to reduce the possibility that both will be blocked in an emergency situation.	Residents must go through a window in a second floor shared resident bedroom to access the exterior stairway which serves as the home's second floor emergency exit.	5-6-10	Door was installed and fire safety approval was complete.	5-12-10 JYP

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

**Western Region**  
 APR 8 2010  
 Page 11 of 18

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Jewart's Whispering Pines Manor P.O. Box 166, 8 West Church Street, Sagamore, PA 16250		<b>CURRENT LICENSE NUMBER</b> Adult Residential Licensing 426850
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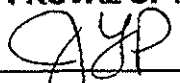
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144c-2 The location of a smoking room or outside smoking area shall be a safe distance from heat sources, hot water heaters, combustible or flammable materials and away from common walkways and exits.	The home's current designated smoking area was located on an outside porch which measures approximately 5'X5' in size. This area was not large enough to provide for a sufficient distance between smokers and a walkway and one of the entrances/exits to the home.	4-26-10	This smoking area was ok'd by all other inspectors. They also have a picnic table for nice use stays away from the home - Policy was changed	Steps have been taken to correct violation; full compliance is not verifiable 5/12/10 JYP Date Initials (DPW)

The outdoor designated smoking area would be moved to a safe distance away from common walkways and exits. All residents and staff will be made aware of the change.

APR-28-2010 10:45 AM LUCINDA JEWART  
 724-763-7049  
 P. 06

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

Page 12 of 18  
**Western Region**

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162c Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.	There were no menus posted in the home.	4-6-10	menus will be posted - residents knocked down This menu will monitor daily to ensure they are posted by the administrator 4-26-10 JYP	Steps have been taken to correct violation; full compliance is not verifiable <del>5/12/10 JYP</del> Date Initials (DPW)

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

**Western Region**  
Page 13 of 15

APR 2 2010  
**CURRENT LICENSE NUMBER**

Adult Residential Licensing  
**426850**

**NAME AND ADDRESS OF PERSONAL CARE HOME**  
 Jewart's Whispering Pines Manor  
 P.O. Box 166, 8 West Church Street, Sagamore, PA 16250

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**REGIONAL REPRESENTATIVE**  
 N. Mandock, T. Newman

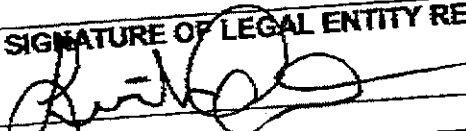
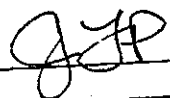
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<b>SIGNATURE OF LEGAL ENTITY REPRESENTATIVE</b> 	<b>DATE</b> 4-26-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 	<b>DATE</b> 5-12-10
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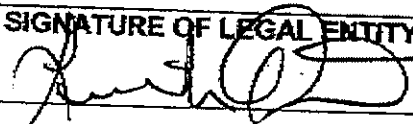
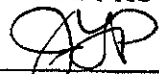
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181c A resident who desires to self-administer his medications shall be assessed by a physician, physician's assistant or certified registered nurse practitioner regarding the ability to self-administer and the need for medication reminders.	Resident #1's MAR indicated that the following medication was to be administered to the resident: Albuterol inhaler-2 puffs 5 times per day Per staff person A, the resident keeps the inhaler on the resident's person and the resident self administers the medication. The resident has not been assessed as to safety self administer medications.	4-26-10	This has been taken care of. I faxed you the correction. Physician has corrected MAR. Will make sure residents are monitored w/ meds. to insure there locked.  Administrator will monitor MAR monthly.	Steps have been taken to correct violation; full compliance is not verifiable 5-12-10 Date Initials (DPW)


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

P. 09  
 7247837049  
 APR-28-2010 10:44 AM LUCINDA.JEWART

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Jewart's Whispering Pines Manor P.O. Box 166, 8 West Church Street, Sagamore, PA 16250		<b>CURRENT LICENSE NUMBER</b> 426850
<b>INSPECTION DATE(S)</b> (Include all dates of the inspection) 04/06/2010	<b>REGIONAL REPRESENTATIVE</b> N. Mandock, T. Newman Western Region	Required on FIRST PAGE only unless Adult Residential Licensing
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187c If a resident refuses to take a prescribed medication, the refusal shall be documented in the resident's record and on the medication record. The refusal shall be reported to the prescriber within 24 hours, unless otherwise instructed by the prescriber. Subsequent refusals to take a prescribed medication shall be reported as required by the prescriber.	Resident #1's MAR indicated that the resident had refused the following medication from 04/01/10-04/06/10 inclusive: Reguloid laxative powder -take by mouth 1x per day. Per staff person A, this refusal had not been reported to the prescriber.	4-26-10	This has been addressed. To the DR I sent you <del>an updated script</del> got new orders from DR to use as a P.R.N. Administrator will monitor MAR monthly. If any changes are needed will call DR immediately. When residents refuse meds doctor will be called immediately.	5-12-10 JJP

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Jewart's Whispering Pines Manor P.O. Box 166, 8 West Church Street, Sagamore, PA 16250		APR 28 2010	<b>CURRENT LICENSE N</b> 426850
<b>INSPECTION DATE(S)</b> (Include all dates of the inspection) 04/06/2010	<b>REGIONAL REPRESENTATIVE</b> Licensing N. Mandock, T. Newman		
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190a A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.	Staff person A, who completed the Department-approved medication administration TTT course in 03/07 and currently is the only staff person administering medications in the home, has had no medication administration annual practicum.	4-26-10	We were not told that the trainer needed observed. We have since completed this. The staff person I trained watched me in order to pass his training. -This staff person	5-12-10 

is a practicum observed. Admin-will ensure that the Admin + Staff Person complete Annual Practicums yrly. by adding to Calendar.

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

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**Western Region**  
**CURRENT LICENSE NUMBER**  
 426850 APR 28 2010  
 Adult Residential Licensing

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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.	Residents #1, #2, had not been educated of their right to question or refuse a medication if they believe there may have been a medication error.	4-26-10	<p><del>We were never told by any other inspectors this training was required</del></p> <p>I have completed this <u>I</u> sent (faxed) you signed copies of training</p> <p>Added to Contracts</p>	5-12-10 JJP

any New resident will have education at time of admission by the Administrator

P. 03  
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APR-28-2010 10:50 AM LUCINDA, JEWART

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

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**Western Region**

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Adult Residential Licensing

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 Jewart's Whispering Pines Manor  
 P.O. Box 166, 8 West Church Street, Sagamore, PA 16250

**INSPECTION DATE(S) (include all dates of the inspection)**  
04/06/2010

**REGIONAL REPRESENTATIVE**  
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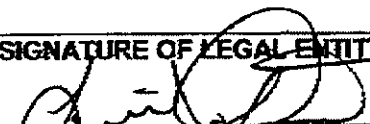
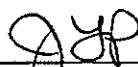
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227g Individuals who participate in the development of the support plan shall sign and date the support plan.	Staff person A, who participated in the development of the 08/08/09 support plan for resident #3, did not sign the support plan.	4-26-10  4-6-10	will make sure all support plans are signed + monitored <sup>as they are</sup> regularly. I completed while inspector was here.	5-12-10 JYP

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

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**Western Region**  
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252 Each resident's record shall include the following information: (3) A photograph of the resident that is no more than 2 years old.	The resident records for residents #1 and #2 lacked a photograph of the resident.	4-26-10	All residents have picture now will continue to update <sup>every 2 years</sup> + take pictures of any new residents - All have been dated.	5-12-10 