

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to FREDERICK MENNONITE COMMUNITY

LEGAL ENTITY

To operate FREDERICK MENNONITE COMMUNITY - ASPEN VILLAGE

NAME OF FACILITY OR AGENCY

Located at PO BOX 498, 2849 BIG ROAD, FREDERICK, PA 19435

(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 31  
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 31

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

No: 132580

*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

JUL 07 2010

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

Ms. Jeanette De La Rosa, Administrator  
Frederick Mennonite Community  
Frederick Mennonite Community – Aspen Village  
P.O. Box 498, 2849 Big Road  
Frederick, Pennsylvania 19435

Dear Ms. De La Rosa:

As a result of the Department of Public Welfare's licensing inspection on April 13, 2010 and April 14, 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**


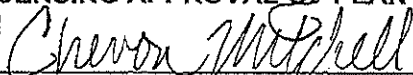
NAME AND ADDRESS OF PERSONAL CARE HOME Frederick Mennonite Community-Aspen Village PO Box 498, 2849 Big Road, Frederick 19435		CURRENT LICENSE NUMBER 132580	
INSPECTION DATE(S) (Include all dates of the inspection) April 13-14, 2010		REGIONAL REPRESENTATIVE Metzger, Frey, Stone	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Jeanette De La Rosa, Personal Care Administrator</i>			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Jeanette De La Rosa</i>		DATE 5-5-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Channon Mitchell</i>
			DATE 5/19/10

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
25a-1 Prior to admission, or within 24 hours after admission, a written resident-home contract (contract) between the resident and the home shall be in place.	The home implemented a rate increase on 1/1/2010. Addendums to contracts for residents #1,2,5,6, and 7 reflecting this rate increase had not been completed.	5-7-10	Resident # 1, 2, 5 6, and 7 rate sheet Addendum signatures were obtained. Copies are on file. All contracts will be reviewed by the PC Administrator/Designee to ensure we receive signatures from all residents when submitting addendums to the contracts.	Steps have been taken to correct violation; full compliance is not yetifiable <i>[Signature]</i> Date 5/19/10 Initials (DPW)

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

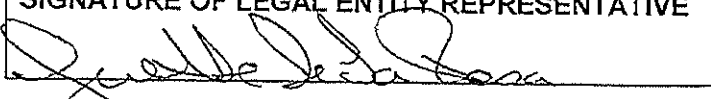


<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Frederick Mennonite Community-Aspen Village PO Box 498, 2849 Big Road, Frederick 19435		<b>CURRENT LICENSE NUMBER</b> 132580			
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> April 13-14, 2010		<b>REGIONAL REPRESENTATIVE</b> Metzger, Frey, Stone			
<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> 5/5/10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 		<b>DATE</b> 5/19/10
<b>1</b> <b>REGULATION</b> 55 Pa.Code § 2600.	<b>2</b> <b>VIOLATION</b>	<b>3</b> <b>DATE BY WHICH CORRECTION WILL BE COMPLETED</b>	<b>4</b> <b>PLAN OF CORRECTION</b> (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	<b>5</b> <b>DATE COMPLIANCE VERIFIED BY DPW</b>	
<b>25d-4SOP</b> A statement signed by the resident, and the resident's designated person if applicable, at the time of admission, informing the resident that the information required in the rent rebate statement of policy is to be kept in the resident's record.	Residents #5 and 7 had not signed statements informing them of the home's rent rebate policy.	5-7-10	Resident #5 and 7 Rent rebate policy Signature was obtained. Copies are on file. All new contracts include the Rent Rebate Policy (see attached). All contracts will be reviewed and monitored by the PC Administrator/Designee for compliance.	5/19/10 CRM	

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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Frederick Mennonite Community-Aspen Village PO Box 498, 2849 Big Road, Frederick 19435		<b>CURRENT LICENSE NUMBER</b> 132580		
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> April 13-14, 2010		<b>REGIONAL REPRESENTATIVE</b> Metzger, Frey, Stone		
<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> 5/5/10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 	
			<b>DATE</b> 5/19/10	

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:  (7) Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.	The attachment to the medical evaluation addressing medication regimen for resident #7 was not completed on the same date as the medical evaluation.	5-5-10	Medical evaluations will be reviewed by the RN Process Coordinator for completion to include all contents required by the regulation. A letter was sent to all physicians.(see letter attached). Medical evaluations will be returned to the physician for proper completion when necessary. Inservice was given to all nurses on 5/3/2010 (see attached). RN Process Coordinator/PC Administrator will monitor for compliance and report to the Performance Improvement committee monthly.	Steps have been taken to correct violation; full compliance is not verifiable 5/3/10 Date Initiate (DPW)

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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Frederick Mennonite Community-Aspen Village PO Box 498, 2849 Big Road, Frederick 19435		<b>CURRENT LICENSE NUMBER</b> 132580			
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> April 13-14, 2010		<b>REGIONAL REPRESENTATIVE</b> Metzger, Frey, Stone			
<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> 5/5/10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 		<b>DATE</b> 5/19/10
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	
231f In addition to the requirements in 225, the resident shall also be assessed annually for the continuing need for the secured dementia care unit.	Residents #2,3,5, and 7 have lived in the home, which is a secured dementia care unit, for longer than a year. The home had not assessed these residents annually for their continuing need to be in the home.	5-5-10	Resident #2, 3, 5, and 7 were re assessed and determined to continue the need to be in a Secured dementia care unit. A statement was written on each assessment. All residents will be assessed annually for the continuing need to be in a secured dementia care unit by the RN Process Coordinator/Unit Coordinator. Inservice given on 5/3/2010 see attached. RN process Coordinator will monitor for compliance.	Steps have been taken to correct violation; full compliance is not verifiable  Date 5/19/10 Initials (DPW)	