



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

Ms. Sandra L. Fair, Executive Director
Homewood at Hanover, Inc.
Homewood at Plum Creek
425 Westminster Avenue
Hanover, Pennsylvania 17331

Dear Ms. Fair:

As a result of the Department of Public Welfare's licensing inspection on April 27, 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 Homewood at Plum Creek 425 Westminster Ave., Hanover, PA 17331		CURRENT LICENSE NUMBER 358910	
INSPECTION DATE(S) (Include all dates of the inspection) April 27 and 28, 2010		REGIONAL REPRESENTATIVE Denny Granahan and Ron Minnich	
SIGNATURE OF LEGAL ENTITY <i>Sandra L. Baird, RHA Exec Dir</i>	DATE 5/21/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Michelle E. Stra...</i>	DATE 5/27/10

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
227d Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services.	The home's record for resident #1, admitted to the home on 1/7/2010, includes progress notes from staff that report resident #1 has had several separate episodes of wandering. As a result staff members are to monitor resident #1 more frequently and provide intervention to prevent further wandering behavior. This information was not documented on the current support plan dated 1/21/2010.	05/12/10	Resident #1's support plan was updated by the LPN Charge Nurse with the documentation on April 27, 2010 to reflect the correct services the resident was receiving at that time. All changes to the resident's support plan - the medical, dental, vision, hearing, mental health and behavioral care services will be updated on the support plan when they occur in order that the support plan is reflective of the services the resident is receiving. The system to ensure compliance - the night See attached sheet	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>Date _____ Initials (DPW) _____</p>

PCH Division
Central Region Field Office

MAY 24 2010

RECEIVED

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