

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to UNITED CHURCH OF CHRIST HOMES, INC.

LEGAL ENTITY

To operate EPHRATA MANOR

NAME OF FACILITY OR AGENCY

Located at 99 BETHANY ROAD, EPHRATA, PA 17522

(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 48  
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 July 17, 2010 until July 17, 2011,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 321880

*Robert E. Robinson*

ISSUING OFFICER

*Kim 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 12 2010

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

Ms. Christina M. Ransier, V.P. of Operations, COO  
30 North 31<sup>st</sup> Street  
Camp Hill, Pennsylvania 17011

RE: Ephrata Manor  
99 Bethany Road  
Ephrata, Pennsylvania 17011

Dear Ms. Ransier:

As a result of the Department of Public Welfare's licensing inspection on May 26, 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 black ink 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 Ephrata Manor 99 Bethany Rd, Ephrata, PA 17522		CURRENT LICENSE NUMBER 321880	
INSPECTION DATE(S) (Include all dates of the inspection) May 26, 2010		REGIONAL REPRESENTATIVE Denny Granahan, Michele Strauser and Rebecca Riel	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) Heather M Brand - Assistant Executive Director / PCHA			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Heather M Brand</i>	DATE 6-16-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cybil Bomberg</i>	DATE 6/20/10

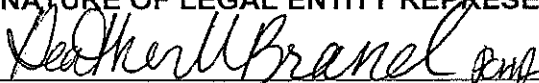
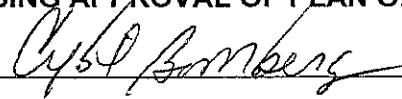
1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
132e A fire drill shall be held during sleeping hours once every 6 months.	The home's last sleeping hour's fire drill was completed on 10/20/2009 at 5:10 am. At the time of this inspection another sleeping hour's fire drill had not yet been completed. More than six months have passed since the 10/20/2009 drill.	7/15/2010	It was found there was no fire drill held during sleeping hours since 10/20/09. The fire drill log was reviewed by Director of Maintenance and PCHA. A sleeping hour's fire drill will be held 6/17/10 to fix immediate violation. To ensure violation of regulation does not occur again, fire drills will be pre-scheduled for the year. The schedule will be created by Director of Maintenance and PCHA. This will allow fire drills to be spread out in time and make sure every six months a drill occurs during the sleeping hours. The schedule will be completed by 7/15/2010 and a binder has been formulated to keep all personal care fire drill information together + organized. -do phone call to	Steps have been taken to correct violation; full compliance is not verifiable <u>6/30/10</u> <u>CB</u> Date Initials (DPW)


JUN 17 2010

Adult Residential Licensing

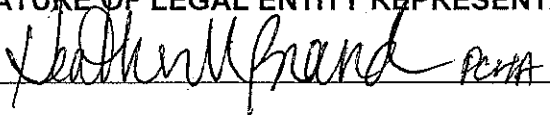
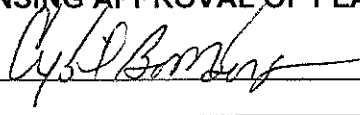
*Administrative on 6/30/10 - schedule of upcoming drills will be kept confidential so that only the Admin. + maintenance person who sets alarm will have knowledge. CB 6/30/10*

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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Ephrata Manor 99 Bethany Rd, Ephrata, PA 17522		<b>CURRENT LICENSE NUMBER</b> 321880	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> May 26, 2010		<b>REGIONAL REPRESENTATIVE</b> Denny Granahan, Michele Strauser and Rebecca Riel	
<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> 6/16/10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 	<b>DATE</b> 6/30/10

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
144c A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures. The written fire safety policy and procedures shall include proper safeguards inside and outside of the home to prevent fire hazards involved in smoking, including extinguishing procedures.	The home permits smoking in an outdoor designated smoking area. However the home's smoking procedures do not address proper safeguards in the designated area to prevent fire hazards involved with smoking, including but not limited to, proper extinguishing procedures and disposal of cigarette butts.	7/15/2010	Ephrata Manor personal care currently permits residents to smoke in a designated smoking area but was found in violation of the LMI for not having a more formal procedure in place to prevent fire hazards involved with smoking. Ephrata Manor will immediately develop a more formal procedure to safeguard these hazards. To ensure this does not occur again the new procedure will be implemented with current policies and reviewed annually. PCHA will be responsible to rectify the problem, and will educate all residents and staff. Residents will be educated at Resident Council on 7/23/2010 and staff will be educated at a staff meeting on 7/21/2010. PCHA will monitor the plan to ensure any updates to the procedure occur in timely manner.	Steps have been taken to correct violation, full compliance is not yet... 6/30/10  Date Initials (E)

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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Ephrata Manor 99 Bethany Rd, Ephrata, PA 17522		<b>CURRENT LICENSE NUMBER</b> 321880	
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<b>SIGNATURE OF LEGAL ENTITY REPRESENTATIVE</b> 	<b>DATE</b> 6-16-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 	<b>DATE</b> 6/20/10

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
185b At a minimum, the procedures in 185a shall include:  (2) A process to investigate and account for missing medications and medication errors.	The home's procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons does not address a process to investigate and account for missing medications and medication errors.	7/15/2010	It was found that Ephrata Manor personal care policies/procedures do not address a missing medication procedure although they do address medication errors. In order to fix the violation immediately, staff education will occur on 7/12/2010 at staff meeting to renew new procedure. If there is a missing medication, staff is to fill out incident report, call PCMA, and begin investigation. Executive Director or PCMA will determine whether or not to contact appropriate authorities. Personal Care Nurses will continue to follow the existing policy for storage, access, and security.	Steps have been taken to correct violation; full compliance is not verifiable. 6/25/10 Date Initials (DPW)

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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Ephrata Manor 99 Bethany Rd, Ephrata, PA 17522		<b>CURRENT LICENSE NUMBER</b> 321880	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> May 26, 2010		<b>REGIONAL REPRESENTATIVE</b> Denny Granahan, Michele Strauser and Rebecca Riel	
<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> <i>Deborah Mand POMA</i>	<b>DATE</b> 6-16-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> <i>[Signature]</i>	<b>DATE</b> 6/20/10

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
187a A medication record shall be kept to include the following for each resident for whom medications are administered:  (6) Dose.	The home's Medication Administration Record (MAR) for resident #1 shows a prescription order for Chlordiazepoxide 10 milligrams (mgs), 1 tablet 2 times per day, but the label on the prescription bottle states take two 5 mg tablets 2 times per day.	7/15/2010	Ephrata Manor Personal Care was found to have discrepancy with a resident and medication. One resident was found to have an order written one way in the Medication Administration Record (MAR) and another way on the prescription bottle. It was found the pharmacy label noted to give two 5mg tablets bid and order was for 1 long tablet bid. It has been recommended that the MAR and prescription bottle be the same. This violation will be corrected by 7/15/10 and personal care staff will be educated to the new procedure. The procedure to rectify this violation will be as follows: In the future, if a nurse receives a pill bottle from the pharmacy and dosing written different than original order but still fulfills the original order, the nurse will make notation in the special instruction box of the MAR. This will alert other nurses that they need to make sure they are giving the correct medication dose to the resident. In order to monitor there will be monthly audits completed and reported at QA meetings to ensure compliance.	Steps have been taken to correct violation; full compliance is not verifiable. 6/30/10 Date Initials (DPW) <i>CB</i>