

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to SHERRY STOCKDALE LEGAL ENTITY

To operate BACK TO BASICS PERSONAL CARE NAME OF FACILITY OR AGENCY

Located at 215 SLAUGHTERHOUSE ROAD, DAYTON, PA 16222 (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 (MAXIMUM CAPACITY)  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

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 August 13, 2010 until August 13, 2011,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 427180

*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.

PW 628 - 4/02



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE  
PO BOX 2675  
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

OCT 26 2010

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

Ms. Sherry Stockdale, Owner  
Sherry Stockdale  
178 Slaughterhouse Road  
Dayton, Pennsylvania 16222

RE: Back to Basics Personal Care  
215 Slaughterhouse Road  
Dayton, Pennsylvania 16222

Dear Ms. Stockdale:

As a result of the Department of Public Welfare's licensing inspection on June 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.

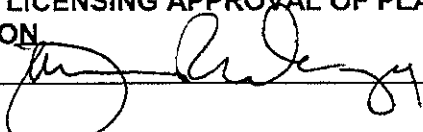
Sincerely,

A handwritten signature in cursive script that reads "Kevin T. Casey".

Kevin T. Casey  
Deputy Secretary

Enclosures  
License  
Violation Report

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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> Back to Basics Personal Care, 178 Slaughterhouse Road, Dayton PA 16222		<b>CURRENT LICENSE NUMBER</b> 427180 <i>Adult Residential Licensing</i>	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> June 10, 2010	<b>REGIONAL REPRESENTATIVE</b> K. Kruppa		
<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>Sherry Stehda's owner</i>	<b>DATE</b> 8-1-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 	<b>DATE</b> 8-6-10

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.	The Violation Report was not posted in a public place in the home.  <b>REPEAT VIOLATION 3/24/2009</b>	07-28-10	THIS VR is currently posted 3c- FIRST paragraph of explanation states that ONCE the Dept has verified correction ON VR the VR NO LONGER NEEDS to be posted Aug 26, 2008 LMF Please explain why the repeat violation? Administrator or designated staff person will check weekly to ensure violation report is posted. Report shows violations with preliminary, not full compliance. JW 8/6/10	Steps have been taken to correct violation; full compliance is not verifiable 8/6/10 Date      Initials (DPW)

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

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<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> June 10, 2010		<b>REGIONAL REPRESENTATIVE</b> K. Kruppa		
<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>Sherry Stochdale</i>		<b>DATE</b> 8-1-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b>	<b>DATE</b>

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
16b The home shall develop and implement written policies and procedures on the prevention, reporting, notification, investigation and management of reportable incidents and conditions.	The written policy and procedures for reportable incidents did not address prevention, investigation and management of incidents.	08-02-10	Policies & Procedures have been developed and are currently in the policies & procedures manual at the facility. A Reportable Incident File is currently being used.  Administrator will review reportable incident policy with all staff persons to ensure it is properly understood and implemented. Documentation will be kept. jmw 8/6/10	Steps have been taken to correct violation; full compliance is not verifiable 8/6/10 jmw Date Initials (DPW)

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

NAME AND ADDRESS OF PERSONAL CARE HOME Back to Basics Personal Care, 178 Slaughterhouse Road, Dayton PA 16222		CURRENT LICENSE NUMBER 427180	
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PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Sherry Stockdale</i>	DATE <i>8-1-10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE <i>8/6/10</i>

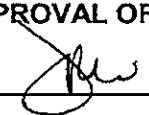
1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
91 Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control center, municipal emergency management agency and personal care home complaint hotline shall be posted on or by each telephone with an outside line.	The emergency phone lists posted next to the telephones did not include the number for the personal care home complaint hotline.	<i>07-28-10</i>	<i>New emergency phone lists have been posted next to all the telephones and have been updated to reflect the number for the personal care home complaint hotline. This number was posted on the resident bulletin board at the time of inspection but did not make the lists by the phone.</i>	<i>[Signature]</i> <i>8/6/10</i>

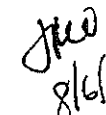
**VIOLATION REPORT**      **Western Region**  
**PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

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<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> June 10, 2010	<b>REGIONAL REPRESENTATIVE</b> K. Kruppa	
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<b>SIGNATURE OF LEGAL ENTITY REPRESENTATIVE</b> <i>Sherry Stockdale</i>	<b>DATE</b> <i>8-1-10</i>	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> <i>[Signature]</i>
		<b>DATE</b> <i>8/6/10</i>

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93a Each ramp, interior stairway and outside steps shall have a well-secured handrail.	There is no handrail for the interior 3 steps that go to the alternate 2 <sup>nd</sup> floor exit.	<i>07-28-10</i>	<i>HANDRAIL HAS BEEN INSTALLED ON SECOND FLOOR EXIT STEPS. NO ADDITIONAL ACTION NECESSARY</i>	<i>[Signature]</i> <i>8/6/10</i>

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

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<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> June 10, 2010		<b>REGIONAL REPRESENTATIVE</b> Adult Residential Licensing K. Kruppa		
<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>Sherry Stucholski</i>		<b>DATE</b> 8-1-10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 	<b>DATE</b> 8/6/10

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94b Interior stairs, exterior steps and ramps shall have nonskid surfaces.	The following sets of steps did not have nonskid surfaces: <ul style="list-style-type: none"> <li>• Exterior steps from 2<sup>nd</sup> floor porch/balcony to ground.</li> <li>• Interior main steps from 1<sup>st</sup> to 2<sup>nd</sup> floor.</li> <li>• Interior 3 steps that go to the alternate 2<sup>nd</sup> floor exit.</li> </ul>	07-31-08	<ul style="list-style-type: none"> <li>* Exterior steps from 2<sup>nd</sup> floor porch/balcony to ground have been painted with NON-SKID paint with volcanic pumice</li> <li>• INTERIOR main steps have a NON-SKID TREAD applied conforms to American with Disabilities Act.</li> <li>• INTERIOR 3 steps-2<sup>ND</sup> FLOOR HAVE BEEN PAINTED WITH NON-SKID PAINT WITH Volcanic Pumice.</li> <li>* Painted steps will be monitored to insure SKID surface does NOT Degrade.</li> </ul>	 8/6/10

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

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<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> June 10, 2010	<b>REGIONAL REPRESENTATIVE</b> K. Kruppa	
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		<b>DATE</b> <i>8/6/10</i>

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102d-1 Toilet and bath areas shall have grab bars, hand rails or assist bars.	The urinal in the first floor men's room did not have a grab bar.	07-28-10	urinal HANDrail/Grab bar HAS been installed  NO ADDITIONAL ACTION IS NECESSARY	<i>[Signature]</i> 8/6/10

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

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INSPECTION DATE(S) (Include all dates of the inspection) June 10, 2010		REGIONAL REPRESENTATIVE <i>Adult Non-Clinical Licensing</i> K. Kruppa	
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141a-2 The medical evaluation shall include the following: (4) Special health or dietary needs of the resident.	Resident #1's medical evaluation dated 04/13/10 lacked the special health or dietary needs of the resident.  Resident #2's medical evaluation dated 03/11/10 lacked the special health or dietary needs of the resident.  REPEAT VIOLATION 3/24/2009	07-28-10  07-28-10	Resident #1's medical Eval. special health or dietary NEEDS HAS BEEN updated. * There was no special dietary needs so Doctor Did NOT fill out will request DR. fill all lines Resident #2's medical Eval special health or dietary needs HAS BEEN updated. * There was no special dietary needs so Doctor Did NOT fill out will request DR. fill all lines. Administrator or designated staff person will review medical evaluation to ensure they are complete. Incomplete forms will be returned to physician's office to be completed <i>JKW 8/6/10</i>	Steps have been taken to correct violation; full compliance is not verifiable Date <i>8/6/10</i> Initials (DPW) <i>JKW</i>