

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to THE VILLAGE AT MORRISONS COVE
LEGAL ENTITY

To operate THE VILLAGE AT MORRISONS COVE
NAME OF FACILITY OR AGENCY

Located at 425 SOUTH MARKET STREET, MARTINSBURG, PA 16662
(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 11
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 August 20, 2010 until August 20, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 303890

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

AUG 23 2010

PHONE: (717) 783-3670

FAX: (717) 783-5662

Mr. Corey Jones, Chief Executive Officer
The Village at Morrisons Cove
429 South Market Street
Martinsburg, Pennsylvania 16662

RE: The Village at Morrisons Cove
425 South Market Street
Martinsburg, Pennsylvania 16662

Dear Mr. Jones:

As a result of the Department of Public Welfare's licensing inspection on June 22, 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,

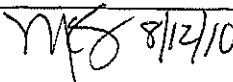
A handwritten signature in cursive script that reads "Kevin T. Casey".

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 The Village at Morrisons Cove 425 South Market Street, Martinsburg, Pennsylvania 16662		CURRENT LICENSE NUMBER 303890
INSPECTION DATE(S) (Include all dates of inspection) June 22, 2010	REGIONAL REPRESENTATIVE Doug Hoover, Serena Chou	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless Multiple representatives produce the plan) - Heather Rosamilia, Administrator of Residential Services		
SIGNATURE OF LEGAL ENTITY Heather Rosamilia	DATE 7/7/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 
		DATE 8/12/10

1 REGULATION 55 Pa. Code §2600	2 VIOLATION/CLASS	3 DATE 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
25c1 The contract shall specify that each resident shall retain, at a minimum, the current personal needs allowance as the resident's own funds for personal expenditure.	Resident #1, admitted 8/27/09, has a contract, dated 8/27/09, with the personal needs allowance listed as \$60.00 rather than the current amount of \$85.00. Resident #1 receives SSI.	June 24, 2010 June 24, 2010 July 30, 2010 July 30, 2010	-All old contracts with wrong SSI amount were destroyed. -New admission packets were created with new contracts in them. -Audit of all SSI contracts to ensure correct amount -Addendums will be completed if needed	 8/12/10

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

NAME AND ADDRESS OF PERSONAL CARE HOME The Village at Morrisons Cove 425 South Market Street, Martinsburg, Pennsylvania 16662		CURRENT LICENSE NUMBER 303890
INSPECTION DATE(S) (Include all dates of inspection) June 22, 2010	REGIONAL REPRESENTATIVE Doug Hoover, Serena Chou	
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 <i>Heather A Rosamilia</i>	DATE 7/7/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>MES</i>
		DATE 8/12/10

1 REGULATION 55 Pa. Code §2600	2 VIOLATION/CLASS	3 DATE 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
121a Stairways, hallways, doorways, passageways and egress routes from rooms and from the building shall be unlocked and unobstructed.	The "Courtyard Café" has an exit which opens outside to concrete patio and a partial fence with a gate. The gate opens directly onto a landscaped bed with a bush blocking the front gate. The left side of the fence ends at the edge of the patio where there is approximately a 1-1.5 foot drop-off to the ground. There is no safe and direct means of egress for residents from this exit.	Aug 2, 2010 Aug 2, 2010 8/31/10	-Removing bush from in front of gate -Mulch will be placed in the area to level the drop off <i>The administrator or designee will check all egress routes to ensure they are not blocked.</i> <i>MES 8/12/10</i>	Steps have been taken to correct violation; full compliance is not verifiable <i>8/12/10</i> Date <i>MES</i> Initials (DPW)

10-08-10;17:04 :VIP-Services

917177833956

:81479350994

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

NAME AND ADDRESS OF PERSONAL CARE HOME The Village at Morrisons Cove 425 South Market Street, Martinsburg, Pennsylvania 16662		CURRENT LICENSE NUMBER 303890	
INSPECTION DATE(S) (Include all dates of inspection) June 22, 2010		REGIONAL REPRESENTATIVE Doug Hoover, Serena Chou	
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 <i>Katherine Rosamita</i>	DATE 7/7/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 8/12/10

1 REGULATION 55 Pa. Code §2600	2 VIOLATION/CLASS	3 DATE 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 The medical evaluation shall include the following: (7) Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.	Resident #2 has a medical evaluation, dated 8/21/09, that refers to an attachment for medications. The attachment is not signed or dated by the physician.	July 30, 2010 July 30, 2010 ongoing	- Resident #2's medication list will be signed by physician -Audit all current records to ensure the completeness of MASI -Administrator or designee will review MASI upon return from physician <i>Medical evaluation</i> <i>[Signature]</i> 8/12/10	Steps have been taken to correct violation; full compliance is not verifiable Date: 8/12/10 Initials: <i>[Signature]</i> (DPW)

10-08-10:11:04 :VIP-Services

9/17/0833906

1814/0302

4/ 0

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

NAME AND ADDRESS OF PERSONAL CARE HOME The Village at Morrisons Cove 425 South Market Street, Martinsburg, Pennsylvania 16662		CURRENT LICENSE NUMBER 303890
INSPECTION DATE(S) (include all dates of inspection) June 22, 2010	REGIONAL REPRESENTATIVE Doug Hoover, Serena Chou	
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 <i>Heather A Rosamtha</i>	DATE 7/7/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>MCS</i>
		DATE 8/12/10

1 REGULATION 55 Pa. Code §2600	2 VIOLATION/CLASS	3 DATE 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 If smoking is permitted, the designated smoking room or area outside the home shall have fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the home, fire resistant furniture and fire extinguishers.	The smoking area beside the main entrance to the facility has 2 plastic chairs with green/white/red mesh on the backs and seats. The material is not fire resistant.	June 22, 2010 July 30, 2010 June 22, 2010 July 16, 2010 October 30, 2010	-Remove furniture from smoking area -Purchase fire proof furniture for smoking area -Metal chairs were placed in smoking area until other furniture has arrived -Reeducate staff regarding type of furniture allowed in smoking area -Staff will monitor smoking area daily for one month and then weekly for two months.	<i>MCS 8/12/10</i>