

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to ROMAN CATHOLIC DIOCESE OF ERIE  
LEGAL ENTITY

To operate JOHN XXIII HOME FOR SENIOR CITIZENS  
NAME OF FACILITY OR AGENCY

Located at 2250 SHENANGO VALLEY FREEWAY, HERMITAGE, PA 16148  
(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 98  
(MAXIMUM CAPACITY)  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 32

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 29, 2010 until July 29, 2011,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 447600

*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 29 2010

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

Mr. Kirk L. Hawthorne, CEO/Administrator  
Roman Catholic Diocese of Erie  
John XXIII Home for Senior Citizens  
2250 Shenango Valley Freeway  
Hermitage, Pennsylvania 16148

Dear Mr. Hawthorne:

As a result of the Department of Public Welfare's licensing inspection on June 29, 2010 and the corrections you have made after our inspection, we have found the above personal care home to be in compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes). Therefore, a regular license is being issued. Your license is enclosed.

Sincerely,

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

Kevin T. Casey  
Deputy Secretary

Enclosure  
License

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

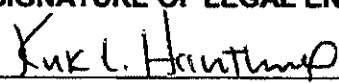
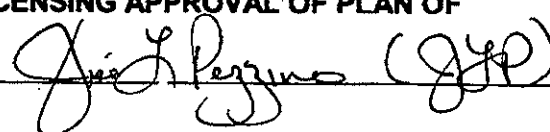
JUL 14 2010

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> John XXIII Home For Senior Citizens 2250 Shenango Valley Freeway Hermitage, PA 16148	<b>CURRENT LICENSE NUMBER</b> 447600 Adult Residential Licensing
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<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> 6-29-10	<b>REGIONAL REPRESENTATIVE</b> Jason Williams, Brenda McAfee, Joe Phillips
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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)**

Kirk Hawthorne, Administrator

<b>SIGNATURE OF LEGAL ENTITY REPRESENTATIVE</b> 	<b>DATE</b> 07/13/2010	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 	<b>DATE</b> 7-20-10
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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
100a The exterior of the building and the building grounds or yard shall be in good repair and free of hazards.	The Assisted Living Courtyard has a sidewalk with a drop off of approx. 4 inches down to a round storm drain in the grass.	07-30-2010	1. Assessment of outside of facility revealed no further hazardous areas. 2. All staff will be educated regarding (100a) specifications. 3. Maintenance Director has ordered a replacement storm drain cap, which will bring drain to proper height. Remainder of area will be back filled with dirt and seeded. 4. Maintenance Director will incorporate exterior safety into the Quality Assurance process.	7-20-10 JJP

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

JUL 14 2010

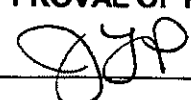
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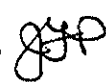
Adult Residential Licensing

<b>INSPECTION DATE(S)</b> (Include all dates of the inspection) 6-29-10	<b>REGIONAL REPRESENTATIVE</b> Jason Williams, Brenda McAfee, Joe Phillips
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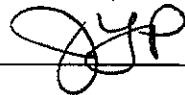
Kirk Hawthorne, Administrator


<b>SIGNATURE OF LEGAL ENTITY REPRESENTATIVE</b> Kirk Hawthorne	<b>DATE</b> 07/13/2010	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 	<b>DATE</b> 7-20-10
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101j7 Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on/off at bedside.	Room 308 has no source of bedside lighting.	06-29-2010	1. Assessment of rooms facility wide revealed no further rooms without bedside lighting. 2. All staff will be educated regarding (101j7) requirements. 3. Resident in room 308 consistently refuses bedside lighting and has removed such on many occasions. Bedside lighting has been added to room #308. 4. PCH Manager will audit bedside lighting throughout facility (including #308) on a weekly basis and incorporate findings into the Quality Assurance Process.	7-20-10 

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

JUL 14 2010

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> John XXIII Home For Senior Citizens 2250 Shenango Valley Freeway Hermitage, PA 16148		<b>CURRENT LICENSE NUMBER</b> 447600
<b>INSPECTION DATE(S)</b> (Include all dates of the inspection) 6-29-10	<b>Regional Licensing</b> <b>REGIONAL REPRESENTATIVE</b> Jason Williams, Brenda McAfee, Joe Phillips	
<b>PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION</b> (Required on FIRST PAGE only unless multiple representatives produce the plan)  Kirk L. Hawthorne, Administrator		
<b>SIGNATURE OF LEGAL ENTITY REPRESENTATIVE</b>  Kirk L. Hawthorne	<b>DATE</b> 07/13/2010	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b>  
		<b>DATE</b> 7-20-10

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
107a The administrator shall have a copy and be familiar with the emergency preparedness plan for the municipality in which the home is located.	The home does not have a copy of the municipality's emergency management plan.	07-30-2010	1. Facility has unsuccessfully attempted to obtain a copy of the County's Emergency Preparedness plan in the past. 2. With the assistance of DPW surveyor(s), the Director of Mercer County Emergency Preparedness has agreed to provide a copy of the "required parts" to John XXIII Home by 7/12/10. 3. All staff will be educated regarding (107a) requirements. 4. Administrator will maintain a current copy of the County's Emergency Preparedness plan on an annual basis and incorporate such into the facility specific Emergency plan.	7-20-10 

A copy of the "County's Plan" will be posted at the Resident Information Centers within the facility.

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

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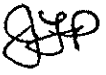
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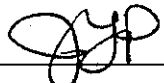
Kirk Hawthorne, Administrator

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121a Stairways, hallways, doorways, passageways and egress routes from rooms and from the building shall be unlocked and unobstructed.	The door to the locked courtyard across from the menu board on the Secured Dementia Care unit does not have a sign indicating that the door is not an exit.	06-30-2010	1. Assessment of outside egress and passageways facility wide, revealed no further missing signs. 2. All staff will be educated regarding (121a) requirements. 3. "This is not an Exit" sign has been added to the Secured Dementia Unit doorway in question. 4. PCH Manager will audit all doorway/passageways signs, including this area on a weekly basis and incorporate findings into the Quality Assurance process.	7-20-10 

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

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<b>PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION</b> (Required on FIRST PAGE only unless multiple representatives produce the plan)  KIRK L HAWTHORNE, ADMINISTRATOR.			
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144c-1 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 designated smoking area outside of the Secure Dementia Unit has fabric cushions on the chairs. The labels on the cushions are badly weather-worn and cannot be read to determine if they are fire resistant.	07-30-2010	1. Assessment of smoking area revealed no further smoking hazards. 2. All staff will be educated regarding (144c-1) requirements. 3. The furniture and fabric cushions within the smoking area have been removed and replaced with proper smoke resistant furniture without cushions. 4. PCH Manager will audit the smoking area on a weekly basis to assure that the properly rated items/devices are present. Results of the audit will be incorporated into the Quality Assurance process.	7-20-10 