

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to LUTHERAN SOCIAL SERVICES OF SOUTH CENTRAL PENNSYLVANIA

LEGAL ENTITY

To operate LUTHERAN SOCIAL SERVICES-GETTYSBURG CENTER

NAME OF FACILITY OR AGENCY

Located at 1075 OLD HARRISBURG ROAD, GETTYSBURG, PA 17325

(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 20
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 September 17, 2010 until September 17, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 344420

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

SEP 21 2010

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

Ms. Angela Dohrman, Vice President
Lutheran Social Services of South Central Pennsylvania
1050 Pennsylvania Avenue
York, Pennsylvania 17404

RE: Lutheran Social Services-Gettysburg Center
1075 Old Harrisburg Road
Gettysburg, Pennsylvania 17325

Dear Ms. Dohrman:

As a result of the Department of Public Welfare's licensing inspection on July 20, 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 Lutheran Social Services – Gettysburg Center 1075 Old Harrisburg Road, Gettysburg, Pennsylvania 17325		CURRENT LICENSE NUMBER 344420	
INSPECTION DATE(S) (Include all dates of the inspection) July 20, 2010		REGIONAL REPRESENTATIVE Doug Hoover	
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>Jana H Stock</i>	DATE 8/4/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cybil Bambery</i>	DATE 9/10/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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 administrator did not have a copy of the local emergency preparedness plan.	07/30/2010 Yearly	Obtained a copy of the local emergency preparedness plan for Adams County. See Attached. Administrator/Designee will contact Adams County Department of Emergency Services on a yearly basis for any updates to the local emergency preparedness plan.	9/10/10 <i>CB</i>

AUG 9 2010

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

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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Jana Stock</i>	DATE 8/4/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cybil Bamber</i>	DATE 9/10/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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
123c For a home serving 9 or more residents, an emergency evacuation diagram of each floor showing corridors, line of travel to exit doors and location of the fire extinguishers and pull signals shall be posted in a conspicuous and public place on each floor.	The evacuation diagrams posted in the facility did not specify the locations of the pull signals.	07/20/2010 Ongoing	The evacuation diagrams posted in the facility were updated with the locations of the pull stations. Administrator/Designee will assure upon update to evacuation maps that all information listed in regulation 123c is included.	<i>9/10/10</i>

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

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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Jana & Stock</i>	DATE 8/4/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cybil Borsley</i>	DATE 9/10/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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																								
132d Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.	The fire safety letter, dated 3/14/10, from [REDACTED] did not specify the locations of fire safe areas. The letter refers to an attached map; however there was no attachment. Evacuation times were as follows: <table border="1"> <thead> <tr> <th>Date</th> <th>Time</th> <th>Evac.</th> </tr> </thead> <tbody> <tr> <td>2/26/10</td> <td>1:28 PM</td> <td>3 m, 35 s</td> </tr> <tr> <td>3/24/10</td> <td>10:23 AM</td> <td>2 m, 34 s</td> </tr> <tr> <td>3/30/10</td> <td>7:28 PM</td> <td>3 m, 48 s</td> </tr> <tr> <td>4/29/10</td> <td>3:30 AM</td> <td>4 minutes</td> </tr> <tr> <td>5/28/10</td> <td>10:05 AM</td> <td>2 m, 20 s</td> </tr> <tr> <td>6/17/10</td> <td>2:55 PM</td> <td>2 m, 45 s</td> </tr> <tr> <td>7/12/10</td> <td>5:16 AM</td> <td>5 minutes</td> </tr> </tbody> </table>	Date	Time	Evac.	2/26/10	1:28 PM	3 m, 35 s	3/24/10	10:23 AM	2 m, 34 s	3/30/10	7:28 PM	3 m, 48 s	4/29/10	3:30 AM	4 minutes	5/28/10	10:05 AM	2 m, 20 s	6/17/10	2:55 PM	2 m, 45 s	7/12/10	5:16 AM	5 minutes	07/20/2010 08/31/2010	Administrator contacted [REDACTED] regarding the fire safety letter not specifying the locations of fire safe areas, letter references to an attached map. No attachment provided. Administrator/Designee will obtain updated fire safety letter to specify the locations of the fire safe areas and attach map. <i>The Administrator will contact the fire safety expert in the advance of the month that a new letter is required or the annual inspection and supervised drill are due to ensure that a letter is received timely and is complete.</i>	<i>9/10/10 OS</i>
Date	Time	Evac.																										
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1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	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: (14) Name and initials of the staff person administering the medication.	The medication administration record for resident #1 was not initialed for the following medications at 8 AM on 7/16/10: <i>Catrate, 600 mg; Diovan, 160 mg; Lexapro, 10 mg; "Daily Vite" and Microzide, 12.5 mg.</i>	8/5/2010 8/31/2010 Beginning week of 8/9/2010 Completed by 11/2/2011	Administrator/Designee will provide education to staff member on regulation 187a(14) Name and initials of the staff person administering medications. Administrator/Designee will provide education to the entire staff on regulation 187a(14). Administrator/Designee will conduct a weekly audit on each MAR for 3 months. Administrator/Designee will conduct a monthly audit on 8 random MAR's for 3 months.	Steps have been taken to correct violation; full compliance is not verifiable 9/10/10 <i>CS</i> Date Initials (DPW)