



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

ADULT RESIDENTIAL LICENSING

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

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**

**MAILING DATE: SEP 29 2010**

Mr. George Hudic, Owner/Operator  
Paraclete Group, LLC  
421 Cottage Lane  
Monroeville, Pennsylvania 15146

RE: George's Personal Care Home  
108 Water Street  
New Stanton, Pennsylvania 15672

Dear Mr. Hudic:

As a result of the Department of Public Welfare's licensing inspection on August 23, 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.

Correction of these violations in accordance with the specified plan of correction is required. Failure to correct this violation may result in further licensing enforcement action.

Sincerely,

A handwritten signature in black ink that reads "Kevin T. Casey".

Kevin T. Casey  
Deputy Secretary

Enclosure  
Violation Report

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

<b>NAME AND ADDRESS OF PERSONAL CARE HOME</b> George's Personal Care Home 108 Water Street, New Stanton, PA 15672		<b>CURRENT LICENSE NUMBER</b> 440572	
<b>INSPECTION DATE(S) (Include all dates of the inspection)</b> 08/23/2010		<b>REGIONAL REPRESENTATIVE</b> N. Mandock, J. Cutter	
<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>	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b>	<b>DATE</b>

<b>1</b> REGULATION 55 Pa.Code § 2600.	<b>2</b> VIOLATION	<b>3</b> DATE BY WHICH CORRECTION WILL BE COMPLETED	<b>4</b> 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)	<b>5</b> DATE COMPLIANCE VERIFIED BY DPW
123d If the home serves one or more residents with mobility needs above or below grade level of the home there shall be a fire-safe area, as specified in writing within the past year by a fire safety expert, on the same floor as each resident with mobility needs	Resident #1, who has mobility needs and requires assistance to evacuate, resides in a resident bedroom on the home's second floor. The home's second floor has no fire-safe area as specified in writing within the past year by a fire safety expert.	10/10/2010	Resident #1 will be moved to a bedroom at grade level. If a bedroom is not available resident #1 will be given a 30 day notice and will be offered assistance moving to another home that is able to meet his/her needs.	