

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to HENDORN, INC.

LEGAL ENTITY

To operate COLE MANOR

NAME OF FACILITY OR AGENCY

Located at 101 MAPLE STREET, COUDERSPORT, PA 16915

(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 30
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 December 7, 2010 until December 7, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 242630

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

DEC 13 2010

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

Mr. Charles H. Updegraff, Jr., Chairman
Hendorn, Inc.
Cole Manor
101 Maple Street
Coudersport, Pennsylvania 16915

Dear Mr. Updegraff:

As a result of the Department of Public Welfare's licensing inspection on September 21, 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 Cole Manor, 101 Maple Street, Coudersport, PA 16915		CURRENT LICENSE NUMBER 242630	
INSPECTION DATES (Include all dates of the inspection) 09/21/2010		REGIONAL REPRESENTATIVE Gerald Dumas, Ann O'Haire	
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>Vida Glover, Director</i>	DATE <i>11-26-10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>James Harvey</i>	DATE <i>12-1-10</i>

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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)	DATE COMPLIANCE VERIFIED BY
66a A staff training plan shall be developed annually.	The annual staff training plan for training year 1/1/10 to 12/31/10 was incomplete as the plan included trainings for only the first five months of the year 2010.	<i>11-26-10</i>	<i>Annual staff training plan for 2010 completed. See attached. I have already started to complete 2011 plan to ensure it is complete for the entire year.</i>	<i>12-1-10 SH</i>

RECEIVED

DEC 01 2010

SCRANTON FIELD OFFICE
Adult Residential Licensing

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

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SIGNATURE OF LEGAL ENTITY <i>Vida Brown, Director</i>	DATE <i>11-26-10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Janice Harvey</i>	DATE <i>12-1-10</i>

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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)	DATE COMPLIANCE VERIFIED BY
82c Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.	A cleaning cart located on the 2nd floor near room #9 had poison solutions that were not secured. The cart was left unattended and had brand name 1 32 oz bottle of Visicleon toilet bowl cleaner marked danger keep out of reach of children and if swallowed seek medical attention. Spearmint brand disinfectant cleaner, 32 oz spray bottle marked seek physician if ingested, may cause circulatory shock or respiratory depression.	<i>9-22-10</i>	<i>All staff was notified by posting and also word of mouth, on the need to keep all cleaning supplies while not in use in the locked compartment of the cleaning cart. (See attached)</i>	<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Steps have been taken to correct violation; full compliance is not verifiable</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Date <i>12-1-10</i></p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Initials (DPW) <i>AV</i></p>

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SIGNATURE OF LEGAL ENTITY <i>Nick D. Lower, Director</i>	DATE <i>11-26-10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>James Harvey</i>	DATE <i>12-1-10</i>

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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)	DATE COMPLIANCE VERIFIED BY
85e Trash outside the home shall be kept in covered receptacles that prevent the penetration of insects and rodents.	The outside dumpster was filled to capacity and the lid was not closed on the dumpster container.	<i>9-22-10</i>	<i>All staff was notified by word of mouth and posting see attached. All lids need to be completely closed at all times, if not able to close lids, notify director immediately to call for a earlier pick up.</i>	<i>12-1-10 JH</i>

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SIGNATURE OF LEGAL ENTITY <i>Veda Glover, Director</i>	DATE <i>11-26-10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>James Henry</i>	DATE <i>12-1-10</i>

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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)	DATE COMPLIANCE VERIFIED BY
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.	Room #11 did not have the following required emergency phone numbers posted on or near the resident's phone: hospital, fire & police departments, and poison control center, municipal emergency management, personal care home hotline and local ambulance.	<i>9-21-10</i>	<i>Resident in Rm #11 had purchased a new phone. Emergency #s were placed on this phone on the day of inspection (See attached pictures)</i>	<i>12-1-10 JH</i>

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SIGNATURE OF LEGAL ENTITY <i>Vida Glover, Director</i>	DATE <i>11-26-10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Joan Harvey</i>	DATE <i>12-1-10</i>

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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)	DATE COMPLIANCE VERIFIED BY
121a Stairways, hallways, doorways, passageways and egress routes from rooms and from the building shall be unlocked and unobstructed.	The home's basement exit had 3 bags of soiled laundry that were stacked up on the left side of the exit door, creating an obstruction to the exit.	<i>9-22-10</i>	<i>Cole Manor received a dirty linen cart from Charles Cole Hospital and has been moved to a different location in the basement away from exit see attached photos</i>	<i>12-1-10 GH</i>

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132e A fire drill shall be held during sleeping hours once every 6 months.	The home did not conduct a fire drill during sleep hours between the one that was conducted on 12/4/09 at 4:45am and the one that was conducted on 10/6/10 at 4:40am. The home is required to conduct a fire drill during sleep hours every six months.	<i>10-6-10</i>	<i>A night time drill was held since I have marked the months on the fire drill log to ensure a night time drill is held every 6 months (see attached)</i>	<div style="border: 1px solid black; padding: 2px; width: fit-content; margin: auto;"> Steps have been taken to correct violation; full compliance is not verifiable Date <i>12-1-10</i> Initials (DPW) <i>SK</i> </div>

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SIGNATURE OF LEGAL ENTITY <i>Vicki Hoover, Director</i>	DATE <i>11-26-10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Juan Harvey</i>	DATE <i>12-1-10</i>

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