

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to THANHOF, INC.

LEGAL ENTITY

To operate POND VIEW MANOR

NAME OF FACILITY OR AGENCY

Located at 1115 MYRTLE ROAD, P.O. BOX 67, WALNUTPORT, PA 18088

(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 8
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 November 23, 2010 until November 23, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 245000

Robert E. Robinson

ISSUING OFFICER

Kurt 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 08 2010

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

Ms. Regina Sharpe, Treasurer
Thanhof, Inc.
Pond View Manor
1115 Myrtle Road, P.O. Box 67
Walnutport, Pennsylvania 18088

Dear Ms. Sharpe:

As a result of the Department of Public Welfare's licensing inspection on September 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.

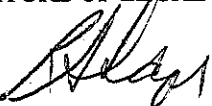

Sincerely,

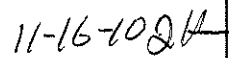
A handwritten signature in cursive script that reads "Kevin T. Casey".

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 POND VIEW MANOR, 1115 MYRTLE ROAD P O BOX 67 WALNUTPORT, PA 18088		CURRENT LICENSE NUMBER 245000	
INSPECTION DATES (Include all dates of the inspection) 09/22/2010		REGIONAL REPRESENTATIVE Ann O'Haire, Mary Ann Domanski	
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 	DATE 11-4-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 11-16-10

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY <i>Corrected</i>	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
63a At least one staff person for every 50 residents who is trained in first aid and certified in obstructed airway techniques and CPR shall be present in the home at all times.	The home was utilizing the on-line training program, CPR Today! Inc., to complete their Adult CPR and First Aid training. Staff person A has an Adult CPR card with an expiration date of 2/11. The practicum portion of this training was not observed by a trained CPR instructor.	Nov. 10, 2010	Staff member will be trained by a State-approved trainer on Nov. 10, 2010. A trainer's cert. will be obtained and placed in PVM's inspection file for State's inspection. Also, future trainers will be asked for their State-approved cert. for PVM's records. Staff will request certs for any future trainings.	11-16-10 



Original


RECEIVED

NOV 10 2010

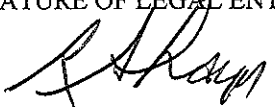

SCRANTON FIELD OFFICE
Adult Residential Licensing

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

NAME AND ADDRESS OF PERSONAL CARE HOME POND VIEW MANOR, 1115 MYRTLE ROAD P O BOX 67 WALNUTPORT, PA 18088		CURRENT LICENSE NUMBER 245000	
INSPECTION DATES (Include all dates of the inspection) 09/22/2010		REGIONAL REPRESENTATIVE Ann O'Haire, Mary Ann Domanski	
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 	DATE 11-4-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 11-16-10


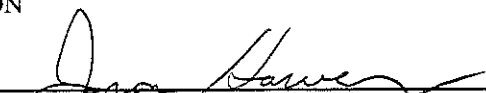
REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY <i>Corrected</i>	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
63b Current training in first aid and certification in obstructed airway techniques and CPR shall be provided by an individual certified as a trainer by a hospital or other recognized health care organization.	The home did not have certificates or records for the current trainer that they were utilizing CPR Today! Inc. The home had copies of student training certificates but did not have any records that the home was utilizing a certified trainer who was trained by a hospital or other recognized health care organization.	Nov. 10, 2010	See previous page. Also, trainers' certs. will be requested prior to going to any further training sessions. Staff has been instructed to do the same for any trainings they attend.	11-16-10 

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

NAME AND ADDRESS OF PERSONAL CARE HOME POND VIEW MANOR, 1115 MYRTLE ROAD P O BOX 67 WALNUTPORT, PA 18088		CURRENT LICENSE NUMBER 245000	
INSPECTION DATES (Include all dates of the inspection) 09/22/2010		REGIONAL REPRESENTATIVE Ann O'Haire, Mary Ann Domanski	
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 	DATE 11-4-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 11-16-10



REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY <i>Corrected</i>	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
93a Each ramp, interior stairway and outside steps shall have a well-secured handrail.	The exterior patio area located on the suite side of the home had 2 steps leading from the patio to the lawn area which had no handrail.	Oct. 1, 2010	A handrail was installed as instructed by the State Inspector. Staff was instructed to report any unsafe or questionable areas to Administration if they should find any.	11-16-10 JH

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

NAME AND ADDRESS OF PERSONAL CARE HOME POND VIEW MANOR, 1115 MYRTLE ROAD P O BOX 67 WALNUTPORT, PA 18088		CURRENT LICENSE NUMBER 245000	
INSPECTION DATES (Include all dates of the inspection) 09/22/2010		REGIONAL REPRESENTATIVE Ann O'Haire, Mary Ann Domanski	
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 	DATE 11-4-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 11-16-10


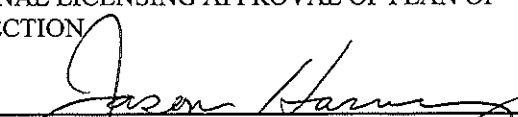
REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY <i>Corrected</i>	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
130a There shall be an operable automatic smoke detector located within 15 feet of each bedroom door.	No smoke detectors were located within 15 feet of the pond view bedroom located on the first floor. There were no smoke detectors located within 15 feet of the Suite bedroom door. 	Oct 1, 2010	A smoke detector was installed in the hallway between the two rooms which meets the regulated distance requirements. This is in addition to another smoke detector within the same hallway that measures 22ft. total length. Also, there are smoke detectors within each bedroom door area. Staff was instructed to be aware of locations of smoke detectors and report any problems.	11-16-10 <i>JH</i>

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

NAME AND ADDRESS OF PERSONAL CARE HOME POND VIEW MANOR, 1115 MYRTLE ROAD P O BOX 67 WALNUTPORT, PA 18088		CURRENT LICENSE NUMBER 245000	
INSPECTION DATES (Include all dates of the inspection) 09/22/2010		REGIONAL REPRESENTATIVE Ann O'Haire, Mary Ann Domanski	
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 	DATE 10-4-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 11-16-10



REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY <i>corrected</i>	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
132g Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.	The home did not vary the times that their sleeping hours drills were held. Sleeping hour drills were all held in the early morning hours as follows: 4/25/10 at 6:40 am; 10/31/09 at 7:15 am; 5/27/09 at 7:45 am	Oct. 1, 2010	The sleeping hours drill will be pre-marked on our Fire Drill Log as to whether it will be a day or night drill (The specific time will not be noted until after the drill.) This will act as a reminder to Administrators who were informed of the specific requirements of this regulation. A copy of this new log is included.	Steps have been taken to correct violation; full compliance is not verifiable 11-16-10 Date: <i>11-16-10</i> Initials: (DPW)

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

NAME AND ADDRESS OF PERSONAL CARE HOME POND VIEW MANOR, 1115 MYRTLE ROAD P O BOX 67 WALNUTPORT, PA 18088		CURRENT LICENSE NUMBER 245000	
INSPECTION DATES (Include all dates of the inspection) 09/22/2010		REGIONAL REPRESENTATIVE Ann O'Haire, Mary Ann Domanski	
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 	DATE 11-4-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 11-16-10

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																																																																	
	<table border="1" style="width: 100%; border-collapse: collapse; font-size: small;"> <thead> <tr> <th>Mont</th> <th>Date</th> <th>Time</th> <th>Evac. Time</th> <th>FSE</th> </tr> </thead> <tbody> <tr><td>Jan</td><td>01/31/2010</td><td>02:10 PM</td><td>45 secs</td><td>No</td></tr> <tr><td>Feb</td><td>02/26/2010</td><td>04:15 PM</td><td>55 secs</td><td>No</td></tr> <tr><td>Mar</td><td>03/23/2009</td><td>12:05 PM</td><td>35 secs</td><td>No</td></tr> <tr><td>Apr</td><td>04/25/2010</td><td>06:45 PM</td><td>1 min. 10 secs</td><td>No</td></tr> <tr><td>May</td><td>05/16/2010</td><td>09:35 AM</td><td>1 min 30 secs</td><td>No</td></tr> <tr><td>Jun</td><td>06/20/2010</td><td>07:15 PM</td><td>55 secs</td><td>No</td></tr> <tr><td>Jul</td><td>07/31/2010</td><td>11:05 AM</td><td>45 secs</td><td>No</td></tr> <tr><td>Aug</td><td>08/29/2010</td><td>02:10 PM</td><td>55 secs</td><td>No</td></tr> <tr><td>Sep</td><td>09/30/2009</td><td>07:10 AM</td><td>2min 30 secs</td><td>No</td></tr> <tr><td>Oct</td><td>10/07/2009</td><td>10:10 AM</td><td>1min 41 secs</td><td>Yes</td></tr> <tr><td>Nov</td><td>11/03/2009</td><td>01:15 PM</td><td>55 secs</td><td>No</td></tr> <tr><td>Dec</td><td>12/02/2009</td><td>11:10 AM</td><td>45 secs</td><td>No</td></tr> </tbody> </table>	Mont	Date	Time	Evac. Time	FSE	Jan	01/31/2010	02:10 PM	45 secs	No	Feb	02/26/2010	04:15 PM	55 secs	No	Mar	03/23/2009	12:05 PM	35 secs	No	Apr	04/25/2010	06:45 PM	1 min. 10 secs	No	May	05/16/2010	09:35 AM	1 min 30 secs	No	Jun	06/20/2010	07:15 PM	55 secs	No	Jul	07/31/2010	11:05 AM	45 secs	No	Aug	08/29/2010	02:10 PM	55 secs	No	Sep	09/30/2009	07:10 AM	2min 30 secs	No	Oct	10/07/2009	10:10 AM	1min 41 secs	Yes	Nov	11/03/2009	01:15 PM	55 secs	No	Dec	12/02/2009	11:10 AM	45 secs	No			<p style="font-size: large; font-family: cursive;">See Previous Page</p>
Mont	Date	Time	Evac. Time	FSE																																																																	
Jan	01/31/2010	02:10 PM	45 secs	No																																																																	
Feb	02/26/2010	04:15 PM	55 secs	No																																																																	
Mar	03/23/2009	12:05 PM	35 secs	No																																																																	
Apr	04/25/2010	06:45 PM	1 min. 10 secs	No																																																																	
May	05/16/2010	09:35 AM	1 min 30 secs	No																																																																	
Jun	06/20/2010	07:15 PM	55 secs	No																																																																	
Jul	07/31/2010	11:05 AM	45 secs	No																																																																	
Aug	08/29/2010	02:10 PM	55 secs	No																																																																	
Sep	09/30/2009	07:10 AM	2min 30 secs	No																																																																	
Oct	10/07/2009	10:10 AM	1min 41 secs	Yes																																																																	
Nov	11/03/2009	01:15 PM	55 secs	No																																																																	
Dec	12/02/2009	11:10 AM	45 secs	No																																																																	

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

NAME AND ADDRESS OF PERSONAL CARE HOME POND VIEW MANOR, 1115 MYRTLE ROAD P O BOX 67 WALNUTPORT, PA 18088		CURRENT LICENSE NUMBER 245000	
INSPECTION DATES (Include all dates of the inspection) 09/22/2010		REGIONAL REPRESENTATIVE Ann O'Haire, Mary Ann Domanski	
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 	DATE 11-4-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 11-16-10

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY <i>Corrected</i>	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
221a The administrator shall develop a program of activities designed to promote each resident's active involvement with other residents, the resident's family and the community.	The home's daily activity calendar had only one activity that was listed on a daily basis. The calendar must have at least 2 activities that are offered that meet the resident's needs and interests.	9-22-10	Additional activities were added to the chart the day after the inspection. Staff was instructed that at least two activities must be listed daily. Staff was reminded that even though they were actually doing several activities per day, they must list it on the event calendar. The Administrator will check Activity List on a regular schedule (monthly.)	11-16-10 <i>JKL</i>

RECEIVED

NOV 10 2010

SCRANTON FIELD OFFICE
Adult Residential Licensing