



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
Norristown State Hospital
1001 Sterigere Street
Bldg 2 Rm. 161
Norristown, Pennsylvania 19401

ADULT RESIDENTIAL LICENSING

1-866-711-4115
610-270-1137

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
Mailing Date: February 14, 2011

Mr. Edward D. Brubaker, NHA
Hatfield Mennonite Homes, Inc
275 Dock Drive
Lansdale, Pennsylvania 19446

RE: Oakwood Court

Dear Mr. Brubaker:

As a result of the Department of Public Welfare's licensing inspection on October 4, 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.

Sincerely,

A handwritten signature in cursive script that reads "Chevon Mitchell".

Chevon Mitchell
Regional Licensing Administrator

Enclosure(s)
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME OAKWOOD COURT, 275 DOCK DRIVE LANSDALE, PA 19446		CURRENT LICENSE NUMBER 127960	
INSPECTION DATES (Include all dates of the inspection) 10/12/2010		REGIONAL REPRESENTATIVE Patricia Adams	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) Hatfield Mennonite Homes, Inc.			
SIGNATURE OF LEGAL ENTITY <i>Eric N. Joth, PEHA</i>	DATE 11/8/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE 2/2/11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE BY WHICH CORRECTION WILL BE	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
16c The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).	On 9/26/10, an allegation of abuse against staff person A was reported by resident #1 to staff person B. This allegation was not reported to the Department until 10/8/10.	10/8/10 10/12/10 10/25/10 11/17/10	Staff person B was counseled on need to report suspected abuse immediately. On 10/12/10, team meetings were held in both Personal Care units @ change of shift to review what constitutes abuse, when it needs to be reported, how to report, & who to report to. Memo sent to all PC Nursing staff regarding when to send incident reports to DPW (see attached). Mandatory Abuse Reporting & Sensitivity trainings for all PC staff are scheduled on Tues., Nov. 16 & Wed., Nov. 17.	Steps have been taken to correct violation; full compliance is not verifiable <i>[Signature]</i> Date Initials (DPW)

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

NAME AND ADDRESS OF PERSONAL CARE HOME OAKWOOD COURT, 275 DOCK DRIVE LANSDALE, PA 19446		CURRENT LICENSE NUMBER 127960	
INSPECTION DATES (Include all dates of the inspection) 10/12/2010		REGIONAL REPRESENTATIVE Patricia Adams	
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>Erin N. Joth, RHA</i>	DATE 11/8/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE 2/2/11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE BY WHICH CORRECTION WILL BE	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
15a The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. §§ 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.	On 9/26/10, an allegation of abuse against staff person A was reported by resident #1 to staff person B. This allegation was again reported to staff person C on 10/7/10. The home did not report the allegation to the State Department of Aging until 10/8/10.	10/8/10 10/12/10 10/25/10 11/17/10	Staff person C was counseled on need to report suspected reports of abuse immediately. On 10/12/10, team meetings were held in both Personal Care units @ change of shift to review what constitutes abuse, when it needs to be reported, how to report, & who to report to. Memo sent to all PC Nursing staff regarding when to send incident reports to DPW (see attached). Mandatory Abuse Reporting & Sensitivity trainings for all PC staff are scheduled on Tues., Nov. 16 & Wed., Nov. 17.	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p><i>[Signature]</i> Date Initials (DPW)</p>