

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to PENNSWOOD VILLAGE

LEGAL ENTITY

To operate PENNSWOOD VILLAGE PERSONAL CARE HOME

NAME OF FACILITY OR AGENCY

Located at 1382 NEWTOWN-LANGHORNE ROAD, NEWTOWN, PA 18940

(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 41
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 January 19, 2011 until January 19, 2012,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **126750**

Robert E. Robinson

ISSUING OFFICER

[Signature]

DIRECTOR

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 - 01/11



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

ADULT RESIDENTIAL LICENSING

FEB 02 2011

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

Ms. Nancy L. Spears, Executive Director
Pennswood Village
Pennswood Village Personal Care Home
1382 Newtown-Langhorne Road
Newtown, Pennsylvania 18940

Dear Ms. Spears:

As a result of the Department of Public Welfare's licensing inspection on November 5, 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 blue ink, appearing to be 'R. Melusky', with a long horizontal stroke extending to the right.

Ronald Melusky
Acting Director

Enclosures
License
Violation Report

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

Page 1 of 3

NAME AND ADDRESS OF PERSONAL CARE HOME PENNSWOOD VILLAGE PERSONAL CARE HOME, 1382 NEWTOWN LANGHORNE ROAD NEWTOWN, PA 18940		CURRENT LICENSE NUMBER 126750	
INSPECTION DATES (Include all dates of the inspection) 11/05/2010		REGIONAL REPRESENTATIVE Christine McHale, Ryan Novak	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Elise Smith, RN Barclay House Nurse Manager</i>			
SIGNATURE OF LEGAL ENTITY <i>Elise Smith</i>	DATE 11/22/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cherron Mitchell</i>	DATE 1/14/11


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
17 Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's	On 11/5/10 at 9:45 am, a book of medication administration records containing confidential information about residents of the home, was unlocked and accessible in the northeast wing of the home.	11/22/10	17) Staff person involved will be counseled on proper procedure for handling resident records. memo sent to nursing staff regarding storage of medication administration records (see attached) Nurse manager will do weekly spot checks to ensure compliance.	Steps have been taken to correct violation; full compliance is not verifiable <i>[Signature]</i> Date 1/14/11 Initials (DPW)

Jan. 14. 2011 2:42AM BARCLAY HOUSE

No. 1539 P. 2

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

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NAME AND ADDRESS OF PERSONAL CARE HOME PENNSWOOD VILLAGE PERSONAL CARE HOME, 1382 NEWTOWN LANGHORNE ROAD NEWTOWN, PA 18940		CURRENT LICENSE NUMBER 126750	
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SIGNATURE OF LEGAL ENTITY 	DATE 11/22/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE

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
designated person, or if a court orders disclosure.				

Jan. 14, 2011 2:42AM BARCLAY HOUSE

No. 1539 P. 3

VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa. Code Chapter 2609

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NAME AND ADDRESS OF PERSONAL CARE HOME PENNSWOOD VILLAGE PERSONAL CARE HOME, 1382 NEWTOWN LANGHORNE ROAD NEWTOWN, PA 18940		CURRENT LICENSE NUMBER 126750	
INSPECTION DATES (Include all dates of the inspection) 11/05/2010		REGIONAL REPRESENTATIVE Christine McHale, Ryan Novak	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Elise Smith, RN Barclay House Nurse Manager</i>			
SIGNATURE OF LEGAL ENTITY <i>Elise Smith</i>	DATE 11/22/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE 1/14/11

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
42s A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.	The home has multiple cameras throughout the hallways in the common areas of the home. The cameras record the footage and the tape is held for a 24-hour period.	11/8/10 42s	All cameras have been disabled. The facilities director will monitor the security cameras weekly to ensure they remain off. The wires on the cameras have been disconnected.	1/14/11 Egan

Jan. 14, 2011 2:42AM

BARCLAY HOUSE

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

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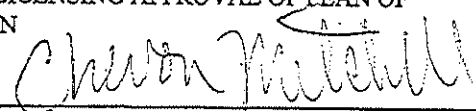
NAME AND ADDRESS OF PERSONAL CARE HOME PENNSWOOD VILLAGE PERSONAL CARE HOME, 1382 NEWTOWN LANGHORNE ROAD NEWTOWN, PA 18940		CURRENT LICENSE NUMBER 126750	
INSPECTION DATES (Include all dates of the inspection) 11/05/2010		REGIONAL REPRESENTATIVE Christine McHale, Ryan Novak	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Eliza Smith, RN Barclay House Nurse Manager</i>			
SIGNATURE OF LEGAL ENTITY <i>Eliza Smith</i>	DATE 11/22/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cherwon Mitchell</i>	DATE 1/14/11

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
107c The home shall maintain at least a 3-day supply of nonperishable food and drinking water for residents.	The home bottles their own emergency water. Because the home is not licensed and inspected to bottle water and ensure water quality, the home's emergency water cannot be considered sanitary.	11/19/10	107c) 115 gallons of bottled water have been purchased and stored for emergency use. (see attached receipt) maintenance manager will inspect water quarterly to ensure proper amount remains on site.	1/14/11 <i>Jan</i>

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

NAME AND ADDRESS OF PERSONAL CARE HOME PENNSWOOD VILLAGE PERSONAL CARE HOME, 1382 NEWTOWN LANGHORNE ROAD NEWTOWN, PA		CURRENT LICENSE NUMBER 126750	
INSPECTION DATES (Include all dates of the inspection) 11/05/2010		REGIONAL REPRESENTATIVE Christine McHale, Ryan Novak	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Elise Smith, RN Barclay House Nurse Manager</i>			
SIGNATURE OF LEGAL ENTITY 	DATE 11/22/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 1/14/11

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
131f Fire extinguishers shall be inspected and approved annually by a fire safety expert. The date of the inspection shall be on the extinguisher.	The fire extinguisher located at the entrance of the west wing of the home has not been inspected by a fire safety expert since June of 2009.	11/22/10	<p>(B1F)</p> <p>The fire extinguisher was replaced with a currently inspected extinguisher, dated February 2010/2011. monthly inspections are done of all fire extinguishers by facilities staff. Annual inspections are done of all fire extinguishers by sprinkler contractor.</p>	1/14/11 <i>Elise</i>

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

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SIGNATURE OF LEGAL ENTITY <i>Elise Smith</i>	DATE 11/22/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE 11/17/11

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
187a A medication record shall be kept to include the following for each resident for whom medications are administered: (1) Resident's name. (2) Drug allergies. (3) Name of medication. (4) Strength. (5) Dosage form. (6) Dose. (7) Route of administration. (8) Frequency of administration. (9) Administration times. (10) Duration of therapy, if applicable. (11) Special	- The medication administration record for resident #1 does not include a diagnosis for Timoptic 1/4%. - The medication administration record for resident #2 does not include a diagnosis for L-Lysine 500 mg. Repeated Violation - 9/8/09	11/22/10	187a) The medication administration records were corrected to include diagnosis. All medication administration records and physician orders are reviewed monthly by RN/LPN to ensure accuracy. A memo was sent to nursing staff, pharmacy and physicians. (see attached)	Steps have been taken to correct violation; full compliance is not verifiable 11/14/11 Date Initials (DPW)

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

NAME AND ADDRESS OF PERSONAL CARE HOME PENNSWOOD VILLAGE PERSONAL CARE HOME, 1382 NEWTOWN LANGHORNE ROAD NEWTOWN, PA 18940		CURRENT LICENSE NUMBER 126750	
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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
precautions, if applicable. (12) Diagnosis or purpose for the medication, including pro re nata (PRN). (13) Date and time of medication administration. (14) Name and initials of the staff person administering the medication.				

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

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NAME AND ADDRESS OF PERSONAL CARE HOME PENNWOOD VILLAGE PERSONAL CARE HOME, 1382 NEWTOWN LANGHORNE ROAD NEWTOWN, PA 18946		CURRENT LICENSE NUMBER 126750	
INSPECTION DATES (Include all dates of the inspection) 11/05/2010		REGIONAL REPRESENTATIVE Christine McHale, Ryan Novak	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Etise Smith, RN Barclay House Nurse Manager</i>			
SIGNATURE OF LEGAL ENTITY <i>Etise Smith</i>	DATE 11/22/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE 1/14/11

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
187b The information in subsections 187a13 and 187a14 shall be recorded at the time the medication is administered.	<ul style="list-style-type: none"> - On 11/2/10, at 6:00 am, resident #3's Omeprazole 20 mg and Levoxyl 75 mg were administered. The medication administration record was not initialed for these medications. - On 11/1/10, 11/2/10, and 11/3/10, at bedtime, resident #4's Mirtazapine was administered. The medication administration record was not initialed for this medication. 	11/22/10	<p>187b)</p> <p>Staff involved were counseled on proper medication administration documentation.</p> <p>(see attached)</p> <p>Nurse manager will inspect MARS monthly to ensure proper documentation.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p><i>MS</i> Date 11/14/10 Initials (DPW)</p>

Jan. 14, 2011 2:43AM · BARCLAY HOUSE

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