

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to SHANNONDELL, INC. LEGAL ENTITY

To operate THE MEADOWS AT SHANNONDELL NAME OF FACILITY OR AGENCY

Located at 6000 SHANNONDELL DRIVE, AUDUBON, PA 19403 (COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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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 58 (MAXIMUM CAPACITY)
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 18

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 March 30, 2011 until March 30, 2012,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 128370

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.



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

ADULT RESIDENTIAL LICENSING

MAR 28 2011

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

Mr. Dan Freed, Vice President of Health Services
Shannondell, Inc.
10,000 Shannondell Drive
Audubon, Pennsylvania 19403

RE: The Meadows at Shannondell
6,000 Shannondell Drive
Audubon, Pennsylvania 19403

Dear Mr. Freed:

As a result of the Department of Public Welfare's licensing inspection on November 12, 2010, November 23, 2010, February 9, 2011 and February 10, 2011 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 black ink, appearing to read "R. Melusky".

Ronald Melusky
Acting Director

Enclosures
License
Violation Report

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

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01/20/2011 15:29 FAX 0103820836

THE MEADOWS

2002

NAME AND ADDRESS OF PERSONAL CARE HOME THE MEADOWS AT SHANNONDELL, 6000 SHANNONDELL DRIVE AUDUBON, PA 19403		CURRENT LICENSE NUMBER 128370	
INSPECTION DATES (Include all dates of the inspection) 11/12/2010, 11/23/2010		REGIONAL REPRESENTATIVE Christine McHale, Justin Trupp, Kimberli Foulkes	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>RUTHIE STUBBLEBINE, PCA</i>			
SIGNATURE OF LEGAL ENTITY <i>Ruthie Stubblebine</i>	DATE 1-20-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 3/22/11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY DE CORRECTION	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
225a A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.	Resident #1, who was admitted to the home on 10/31/09, wears a watchmate due to the resident's potential to wander and need for additional supervision. The resident's assessment dated 11/12/09 does not state that the resident wears a watchmate, states that the resident requires occasional checking, and does not list wandering as a problem.	2-07-2011	<p>1- Resident #1 will have their assessment modified to reflect their need for a watchmate.</p> <p>2- the remaining residents that require watchmates will have their assessments audited to ensure that they contain the appropriate designation regarding watchmates</p> <p>3- The lead charge nurse will be educated on this need</p> <p>4- On an ongoing basis, Resident assessments will be audited to ensure accuracy</p> <p>5- The Personal Care Admin or designee is responsible for these changes and for ongoing compliance</p>	2/9/11 "Watchmate" system documented

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

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NAME AND ADDRESS OF PERSONAL CARE HOME THE MEADOWS AT SHANNONDELL, 6000 SHANNONDELL DRIVE AUDUBON, PA 19403		CURRENT LICENSE NUMBER 128370	
INSPECTION DATES (Include all dates of the inspection) 11/12/2010, 11/23/2010		REGIONAL REPRESENTATIVE Christine McHale, Justin Trupp, Kimberli Foulkes	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>RUTHIE STUBBIEBWE, PCAA</i>			
SIGNATURE OF LEGAL ENTITY <i>Ruthie Stubbiebwe</i>	DATE 1-20-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 3/22/11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY OF CORRECTION	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
225c The resident shall have additional assessments as follows: (1) Annually. (2) If the condition of the resident significantly changes prior to the annual assessment. (3) At the request of the Department upon cause to believe that an update is required.	<p>Resident #2, who was admitted to the home on 5/15/06, wears a watchmate due to the resident's potential to wander and need for additional supervision. The resident's most recent assessment dated 4/22/10 does not state that the resident wears a watchmate, states that the resident shows no signs of dementia, states that the resident requires occasional checking, and does not list wandering as a problem.</p> <p>- Resident #3, who was admitted to the home on 2/27/06, had a fall on 1/13/10 that required an x-ray. The resident's most recent assessment dated 2/23/10 does not list the resident's fall history.</p>	02-07-2011	<p>1) RESIDENT # 2 IS INDEPENDENT AND ALERT & ORIENTED. RESIDENT # 2 HAS NEVER REQUIRED A WATCHMATE AT ANY TIME DURING RESIDENCY.</p> <p>2) THE PC ADMIN WILL AUDIT REMAINING ASSESSMENTS TO ENSURE ACCURACY RELATED TO FALL HISTORY.</p> <p>3) THE LEAD CHARGE NURSE WILL BE EDUCATED ON THIS NEED</p> <p>4) ON AN ONGOING BASIS, RESIDENT ASSESSMENTS WILL BE AUDITED TO ENSURE ACCURACY</p>	3/22/11 <i>do</i>

5) - THE PC ADMIN WILL MONITOR FOR COMPLIANCE

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THE MEADOWS

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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 THE MEADOWS AT SHANNONDELL, 6000 SHANNONDELL DRIVE AUDUBON, PA 19403		CURRENT LICENSE NUMBER 128370	
INSPECTION DATES (Include all dates of the inspection) 02/09/2011		REGIONAL REPRESENTATIVE Paul Metzger, Sanford Stone, Donald Frey	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>RUTHIE STUBBLEBINE, AHA</i>			
SIGNATURE OF LEGAL ENTITY <i>Ruthie Stubblebine</i>	DATE 3-4-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Donald Frey</i>	DATE 3/22/11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE BY WHICH CORRECTION WILL BE COMPLETED	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
121b Doors used for egress routes from rooms and from the building may not be equipped with key-locking devices, electronic card operated systems or other devices which prevent immediate egress of residents from the building, unless the home has written approval or a variance from the Department of Labor and Industry, the Department of Health or the appropriate local building authority.	The external gate leading from the secure dementia care unit courtyard is locked with a key operated padlock.	April 15, 2011 SEE ATTACHED ↓	SEE ATTACHED DOCUMENTS ↓	Steps have been taken to correct violation; full compliance is not verifiable 3/22/11 Date Initials (DPW)

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THE MEADOWS

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

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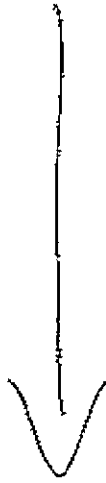
NAME AND ADDRESS OF PERSONAL CARE HOME THE MEADOWS AT SHANNONDELL, 6000 SHANNONDELL DRIVE AUDUBON, PA 19403		CURRENT LICENSE NUMBER 128370	
INSPECTION DATES (Include all dates of the inspection) 02/09/2011		REGIONAL REPRESENTATIVE Paul Metzger, Sanford Stone, Donald Frey	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY <i>Russell Swartz Line</i>	DATE 3-4-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Donald J. Frey</i>	DATE 3/22/11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE BY WHICH CORRECTION WILL BE COMPLETED	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
202 The following procedures are prohibited: (1) Seclusion, defined as involuntary confinement of a resident in a room, from which the resident is physically prevented from leaving, is prohibited. (2) Aversive conditioning, defined as the application of startling, painful or noxious stimuli, is prohibited. (3) Pressure point techniques, defined as the application of pain for the purpose of achieving	The exit door at the rear of the home has an electronic locking mechanism that is activated when residents who wear a "watchmate" approach the door. This door is not within the home's secure dementia care unit. Therefore the locking mechanism is considered a mechanical restraint.	MARCH 7, 2011	SEE ATTACHED DOCUMENTS ↓	3/22/11 <i>DF</i>

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

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NAME AND ADDRESS OF PERSONAL CARE HOME: THE MEADOWS AT SHANNONDELL, 6000 SHANNONDELL DRIVE AUDUBON, PA 19405		CURRENT LICENSE NUMBER 128370	
INSPECTION DATES (include all dates of the inspection) 02/09/2011		REGIONAL REPRESENTATIVE Paul Metzger, Sanford Stone, Donald Frey	
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>Russie (Shannon) Lind</i>	DATE 3.4.11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE

REGULATION 55 Pa.Code §2600	VIOLATION	DATE BY WHICH CORRECTION WILL BE COMPLETED	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
compliance, is prohibited. (4) A chemical restraint, defined as use of drugs or chemicals for the specific and exclusive purpose of controlling acute or episodic aggressive behavior, is prohibited. (5) A mechanical restraint, defined as a device that restricts the movement or function of a resident or portion of a resident's body, is prohibited. (6) A manual restraint, defined as a hands-on physical means that restricts, immobilizes or		3/7/11	SEE ATTACHED 	

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THE MEADOWS

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


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THE MEADOWS

005

NAME AND ADDRESS OF PERSONAL CARE HOME THE MEADOWS AT SHANNONDELL, 6000 SHANNONDELL DRIVE AUDUBON, PA 19403		CURRENT LICENSE NUMBER 128370	
INSPECTION DATES (Include all dates of the inspection) 02/09/2011		REGIONAL REPRESENTATIVE Paul Metzger, Sanford Stone, Donald Frey	
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>Russie Beckett Lind</i>	DATE 3-4-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE

REGULATION 55 Pa.Code §2600	VIOLATION	DATE BY WHICH CORRECTION WILL BE COMPLETED	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
reduces a resident's ability to move his arms, legs, head or other body parts freely, is prohibited.		3/7/11	SEE ATTACHED 	



The Meadows

AT
SHANNONDELL

6000 SHANNONDELL DRIVE • AUDUBON, PENNSYLVANIA 19403

Tel 610.728.5400

FAX 610.728.5220

www.shannondell.com

March 4, 2011

Department of Public Welfare
Norristown State Hospital
1001 Sterigere Street
Bldg 2, Rm. 161
Norristown, PA 19401

Re: Plan of Correction for Violation Report
Date of inspection -- February 9, 2011

Dear Ms. Mitchell -

Please accept the following plan of correction for the violation report that was forwarded to our office on February 25, 2011. This report corresponds to the inspection that occurred on 2.09.2011.

This report is in addition to the attached violation report. The plan of correction for both 121b and 202 will be outlined separately below.

121b Date by which correction will be implemented -- April 15, 2011. As you will see from the plan of correction, the facility is in the process of working with the local fire authority as well as the vendor and contractor for our electronic door locking system so that a decision can be made regarding our specific plan to correct the outlined violation. Because of these two variables, we are requesting the correction date of 4.15.2011. If we are forced to implement option (b) below, the project is extensive as it requires adding new wires on the inside of the building, getting those wires to the outside of the building, pulling those wires through an underground trench / conduit to the gate and then, ultimately programming the new card identification device at the gate. The plan to correct this violation has already been initiated and we will continue until it is resolved on a permanent basis but prefer to provide your office with a date of compliance that we believe to be achievable and realistic considering the number of "outside" variables involved in this plan.

1. To address this violation, the facility plans to do one of the following things -
 - a. We are in the process of communicating with the local fire marshal so that he can inspect the courtyard and the gate leading from it. We have requested his approval to



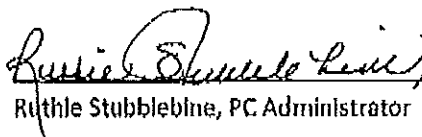
allow the gate to remain locked in accordance with the language in 121b. If he is not agreeable to this request, we will implement (b) of this section

- b. The gate will be modified so that it remains locked at all times to ensure Resident safety but it will be directly connected to the facility fire alarming system and automatically releases in the event of an emergency.
2. This will be monitored by the Personal Care Administrator

202 Date by which correction will be implemented – March 7, 2011

1. The Meadows at Shannondell ("Shannondell") submits this plan of correction for 55 Pa. Code §2600.202 under the procedures established by the Department of Public Welfare ("DPW") in order to comply with DPW's directive to change conditions which DPW alleges are deficient under State regulations governing personal care homes. This plan of correction for 202 should not be construed as either a waiver of Shannondell's right to appeal or an admission of past or ongoing violations of State regulatory requirements.
2. In response to the alleged violation under 202 regarding the exit door at the rear entrance of the facility, the programming on the WatchMate system on that same door will be modified to remove the feature that renders the door temporarily secured when a resident approaches it while wearing a WatchMate bracelet. With this modification, the door will not be secured or locked at any time.
3. The facility plans to request a waiver of this regulation as it is the position of Shannondell that WatchMate safety system on the rear exit door in question ensures the safety and well being of the residents that reside in the facility. Shannondell, however, shall ensure that the programming function that temporarily locks the WatchMate safety system remains deactivated pending the review of our waiver request.
4. This will be monitored by the Personal Care Administrator

Respectfully Submitted –


 Ruthie Stubblebine, PC Administrator

3.4.11
 Date