

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to ST. ANNE HOME, INC.

LEGAL ENTITY

To operate VILLA ANGELA AT ST. ANNE HOME

NAME OF FACILITY OR AGENCY

Located at 685 ANGELA DRIVE, GREENSBURG, PA 15601

(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 54
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 24, 2011 until January 24, 2012,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **428040**

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 22 2011

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

Mr. Jeffrey S. Long, President/CEO
St. Anne Home, Inc.
Villa Angela at St. Anne Home
685 Angela Drive
Greensburg, Pennsylvania 15601

Dear Sister Fiedor:

As a result of the Department of Public Welfare's licensing inspection on November 15, 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.

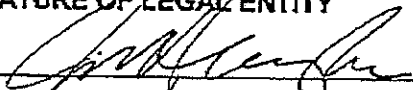
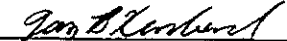
Sincerely,

A handwritten signature in 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**

NAME AND ADDRESS OF PERSONAL CARE HOME Villa Angela at St. Anne Home 685 Angela Drive, Greensburg, PA 15601		CURRENT LICENSE NUMBER 428040	
INSPECTION DATE(S) (Include all dates of the inspection) 11/15/10		REGIONAL REPRESENTATIVE Michelle Glidden and Jason Williams	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (required on FIRST PAGE only unless multiple representatives produce the plan) Jennie R. Long, Director, Villa Angela at St. Anne Home			
SIGNATURE OF LEGAL ENTITY 	DATE 12/1/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 1-16-11

REGULATION 55 Pa.Code § 2600.	VIOLATION/CLASS	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)	5 DATE COMPLIANCE VERIFIED BY
81 b Wheelchairs, walkers, prosthetics devices and other apparatus used by residents shall be clean, in good repair and free of hazards.	Resident #1 has a half length bedrails on his/her bed. Alternatives were not considered in order to protect the health and safety of this resident. There was no physician's order for the use of the bedrail and the assessment and support plan do not address the resident's need for the bedrail or the health and safety precautions while the bedrail is in use. The resident is not monitored when the bedrail is in use. Repeated Violations: 12/15/2009		On 11-15-2010, it was found that the stated bed belonged to the resident. The director spoke with the resident directly and indicated that [redacted] used it as a "pull-up" occasionally if [redacted] was having an "off day." The 1/2 rail was removed by the maintenance man on duty 11-15-2010. The Director indicated that staff could assist him in getting a transfer bar that met DPW standards ordered for him. He declined. The following will be done to prevent this from recurring: <ul style="list-style-type: none"> The staff will be educated on the regulation and the safety concerns of the use of bed rails. 	Steps have been taken to correct violation; full compliance is not verifiable 1-16-11 Date Initials (DPW)

Western Region

DEC 3 2010

Adult Residential Licensing

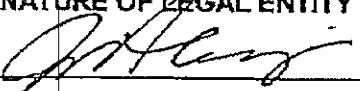

DEC-06-2010 (MON) 10:13

VILLA ANGELA

(FAX) 724 837 1063

P. 003/039

**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

NAME AND ADDRESS OF PERSONAL CARE HOME Villa Angela at St. Anne Home 685 Angela Drive, Greensburg, PA 15601		CURRENT LICENSE NUMBER 428040	
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SIGNATURE OF LEGAL ENTITY 		DATE 12/6/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 
			DATE 1-10-11

REGULATION 55 Pa.Code § 2600.	VIOLATION/CLASS	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)	5 DATE COMPLIANCE VERIFIED BY
51 b Continued			<ul style="list-style-type: none"> All staff will be educated to monitor beds for side rails and transfer bars when entering and exiting resident rooms. If staff members find a rail or transfer bar they are to report it immediately to the RCC on duty. If it is a side rail with out the appropriate order, Staff will notify resident or family member and it will be immediately removed. If a transfer bar is found, staff will verify measurement of the bar to ensure that it meets state guidelines. If it does not meet those requirements we will notify the resident or family and have it replaced with another bar that meets those requirements. 	

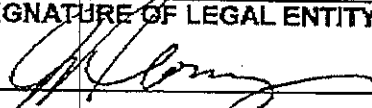
Western Regional

DEC 6 2010

Pennsylvania Residential Licensing

**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

Page 3 of 15

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REGULATION 55 Pa.Code § 2600.	VIOLATION/CLASS	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)	⁵ DATE COMPLIANCE VERIFIED BY
81 b Continued			<ul style="list-style-type: none"> If a hospital bed needs to be ordered for a resident, we will request that the doctor write the script for a hospital bed with out rails. This will be tracked and monitored as a Quality Assurance audit. 	


DEC 5 2010

Residential Licensing


DEC-06-2010(MON) 10:13 VILLA ANGELA (FAX) 724 837 1063 P. 005/039

VIOLATION REPORT
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SIGNATURE OF LEGAL ENTITY 		DATE 1/11/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 1-12-11

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132b A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.	The last fire safety inspection and fire drill observed by a fire expert was conducted on 8/13/09.		Annual drill and safety inspection occurred November 11, 2010 by Greensburg Volunteer Fire Department. This specific operation was lead by assistant chief ██████████ (fire safety expert). We have a letter dated 11-29-2010 indicating our Evacuation time specified by our fire safety expert (see attachments). In order to ensure that this will not occur again, the PCH Director will begin making contact with the Greensburg Volunteer F.D. by letter 6 months prior to the anniversary date of the previous year's letter (for 2011 the letter will go out prior to May 11 th 2011). The request letter will include the date of the previous letter to give the Fire dept. a target date. If the PCH director does not hear from the Greensburg V. F. D. after	1-12-11 

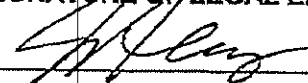
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132b Continued	<table border="1"> <thead> <tr> <th>Mont</th> <th>Date</th> <th>Time</th> <th>Evac.Time</th> <th>FSE</th> </tr> </thead> <tbody> <tr><td>Jan</td><td>01/13/2010</td><td>02:00 PM</td><td>4 Min.</td><td>No</td></tr> <tr><td>Feb</td><td>02/23/2010</td><td>05:55 PM</td><td>4 Min 30 s</td><td>No</td></tr> <tr><td>Mar</td><td>03/16/2010</td><td>03:00 AM</td><td>6 Min.</td><td>NO</td></tr> <tr><td>Apr</td><td>04/16/2010</td><td>10:56 AM</td><td>4 Min.</td><td>No</td></tr> <tr><td>May</td><td>05/19/2010</td><td>08:00 PM</td><td>6 Min.</td><td>No</td></tr> <tr><td>Jun</td><td>06/17/2010</td><td>04:00 AM</td><td>6 Min.</td><td>No</td></tr> <tr><td>July</td><td>07/21/2010</td><td>08:34 AM</td><td>5 Min.</td><td>No</td></tr> <tr><td>Aug</td><td>08/18/2010</td><td>10:00 PM</td><td>6 Min.</td><td>No</td></tr> <tr><td>Sept</td><td>09/14/2010</td><td>05:00 AM</td><td>6 Min 25 s</td><td>No</td></tr> <tr><td>Oct</td><td>10/27/2010</td><td>01:00 PM</td><td>5 Min. 45 s</td><td>No</td></tr> <tr><td>Nov</td><td>11/17/2009</td><td>05:34 AM</td><td>5 Min 10 s</td><td>No</td></tr> <tr><td>Dec</td><td>12/17/2009</td><td>04:37 AM</td><td>15 Min</td><td>No</td></tr> </tbody> </table>	Mont	Date	Time	Evac.Time	FSE	Jan	01/13/2010	02:00 PM	4 Min.	No	Feb	02/23/2010	05:55 PM	4 Min 30 s	No	Mar	03/16/2010	03:00 AM	6 Min.	NO	Apr	04/16/2010	10:56 AM	4 Min.	No	May	05/19/2010	08:00 PM	6 Min.	No	Jun	06/17/2010	04:00 AM	6 Min.	No	July	07/21/2010	08:34 AM	5 Min.	No	Aug	08/18/2010	10:00 PM	6 Min.	No	Sept	09/14/2010	05:00 AM	6 Min 25 s	No	Oct	10/27/2010	01:00 PM	5 Min. 45 s	No	Nov	11/17/2009	05:34 AM	5 Min 10 s	No	Dec	12/17/2009	04:37 AM	15 Min	No		30days, the Plant operations director will follow up with a call to the Fire Chief or Assistant Chief directly. If a definite date is not decided upon, the plant operations director will follow up again in an additional 30 days. All letters and phone calls will be logged. This will assure that there will be follow through.	
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JRN-11-2011(TUE) 11:23 VILLA ANGELA (FRX) 724 837 1063 P. 003/007

**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

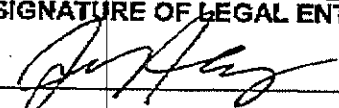
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183b Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.	<p>The following medications were found unlocked and accessible on resident #1's bedside table:</p> <ul style="list-style-type: none"> • Antacid with calcium • Melatonin 5mg • Zelarpar 1.25mg <p>The following medications were found unlocked and accessible on resident #2's bedside table:</p> <ul style="list-style-type: none"> • Systane eye drops • Orajel Benzocaine 20% • Bengay Pain relieving Cream <p>The following medications were found unlocked and accessible on resident #3's bedside table:</p> <ul style="list-style-type: none"> • Screts Cough Lozenges • Medicated Vaporizing Chest Rub. <p>Repeated Violations: 12/15/2009</p>	Western Region	<p>Immediately following the exit conference with the Regional representatives Staff were directed to talk to the residents regarding their medications. Resident #1 & #3 are [redacted] and alert and oriented. Resident #1 went out and purchased 2 locked boxes for both of them. When [redacted] left [redacted] room [redacted] locked [redacted] door. Res #3 locked [redacted] room when [redacted] left as well.</p> <p>Resident #2 was very argumentative regarding [redacted] medications and [redacted] already had a locked box stored under [redacted] bed. [redacted] went to the director and wanted to know who gave "Those people permission to enter my room with out my permission." Staff and the director explained the</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>1-10-11 Date Initials (DPW)</p>

DEC 6 2010

Adult Residential Licensing

**VIOLATION REPORT
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183b Continued	Western Region		<p>regulation to the resident. The director also called the resident's daughter regarding the situation. She indicated that she would be in Friday, 11-17-2010 to speak with her [redacted]. The Dtr. spoke to [redacted] regarding the issue and encouraged the resident to use the locked box in [redacted] room. The resident is currently using the box.</p> <p>To assure that this does not happen again we are going to do the following:</p> <ul style="list-style-type: none"> As staff are passing medications, they will be required to check all the residents who self administer medications and sign off on the MAR's each shift. This will be monitored by our Quality Assurance program on a monthly 	

DEC 8 2010

Adult Residential Licensing

**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

Page 8 of 1.5

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193b Continued	Western Region		<ul style="list-style-type: none"> • basis and reported at the quarterly meetings. • The residents that self administer will be re-educated on the importance of keeping medications in locked containers. • On admission, residents that will be self administering medications will be educated on how to store medications safely and informed that this will be monitored by staff on a regular basis. 	

DEC 5 2010

Adult Residential Licensing

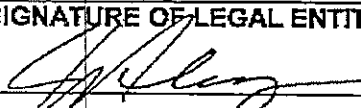
DEC-06-2010 (MON) 10:15 VILLA ANGELA


(FRX)724 837 1063

P. 0177039

**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

Page 4 of 15

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185a The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.	Resident #4 has Mirapex .25 mg tablet listed on their medication administration record but it is not available for administration in the home. Western Region		After the regional Representatives left, staff investigated that the medication was an "as needed" medication and was not used between August and the day the representatives were here. The RCC called the residents physician and had the medication discontinued because of non-use (attachments -2). * To assure that this does not occur again we are going to institute weekly medication cart audits. The 1-7 RCC's will audit a medication cart each week. Checking the MAR's against the medications in the carts. This will ensure that we have medications for each of the resident orders. This will be monitored on a monthly	1-10-11 

DEC 2010

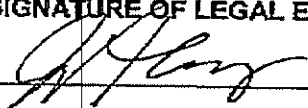
Adult Residential Licensing

DEC-06-2010(MON) 10:15 VILLA ANGELA

(FRX) 724 837 1063

P. 018/039

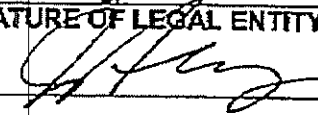

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185a continued	Western Region DEC 2010		basis and reported in the quarterly Quality Assurance meetings. Any discrepancies will be followed up on and documented on the QA forms for tracking purposes.	

Adult Residential Licensing

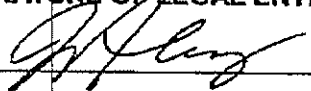
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			DATE 1-10-11

REGULATION 55 Pa.Code § 2600.	VIOLATION/CLASS	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)	5 DATE COMPLIANCE VERIFIED BY
187 a A medication record shall be kept to include the following for each resident for whom medication is 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 precautions, if	The medication administration record for resident #1 did not include the medication Amoxicillin 500mg, which was being stored on the medication cart. Western Region DEC 8 2010		Upon further investigation, it was found that the dentist had called the order in for this medication August 9, 2010 as a prophylactic measure prior to the resident's dental appointments. The Dentist did not send a copy of the prescription for the RCC. At the end of the month, the RCC who completed change over missed the order and did not carry it over. We called the pharmacy and received a copy of the prescription. (see attachment) The order has been reinstated for the resident to use for his next dentist appointment. He did not have any appointments in the time that the order was missing on the chart. • To assure that this does not occur again we are going to chart audits on a weekly basis. The 11-7 staff	1-10-11 

Adult Residential Licensing

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

NAME AND ADDRESS OF PERSONAL CARE HOME Villa Angela at St. Anne Home 685 Angela Drive, Greensburg, PA 15601		CURRENT LICENSE NUMBER 428040		
INSPECTION DATE(S) (Include all dates of the inspection) 11/15/10		REGIONAL REPRESENTATIVE Michelle Glidden and Jason Williams		
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (required on FIRST PAGE only unless multiple representatives produce the plan) Jennie R. Long, Director Villa Angela at St. Anne Home				
SIGNATURE OF LEGAL ENTITY 		DATE 12/6/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 1/10/11

REGULATION 55 Pa.Code § 2600.	VIOLATION/CLASS	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)	5 DATE COMPLIANCE VERIFIED BY
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.	Western Region		will review the charts for new orders and check the current orders against the MAR's and the medications in the carts. This will ensure that we have orders for each of the medications for each of the residents. <ul style="list-style-type: none"> This will be monitored on a monthly basis and reported in the quarterly Quality Assurance meetings. Any discrepancies will be followed up on and documented on the QA forms for tracking purposes. The RCC's will receive education in regard to the QA audits and what is expected of them when they receive medications with out an order. 	

DEC 2010

Adult Residential Licensing

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**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

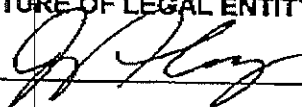
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SIGNATURE OF LEGAL ENTITY <i>[Handwritten Signature]</i>		DATE 12/6/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Handwritten Signature]</i>
			DATE 1-10-11

REGULATION 55 Pa.Code § 2600.	VIOLATION/CLASS	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)	⁵ DATE COMPLIANCE VERIFIED BY
224a A determination shall be made within 30 days prior to admission and documented on the Department's preadmission form that the needs of the resident can be met by the services provided by the home.	There was no preadmission screening completed for resident #1, admitted 6/15/10, or resident #5, admitted 8/1/09. <div align="center">Western Region</div>		The RCC's and administrative staff reviewed the indicated residents' charts, their open files in medical records, along with admissions prior to and after them to see if the pre-admission screens had been misfiled. Neither pre-admission screen was found in any of the locations indicated. The pre-admission screens have been completed for the residents' current conditions (attachments). To assure the violation does not recur, we will monitor the preadmission completion of a Quality Assurance Audit. <ul style="list-style-type: none"> This audit will include the monthly monitoring of all of the new admissions to the facility. This will be reported at the quarterly QA 	1-10-11 <i>[Handwritten Signature]</i>

DEC 6 2010

Adult Residential Licensing



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PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

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224a continued	Western Region DEC 6 2010		meetings. • The RCC's will receive Education Regarding this regulation, Policy for the pre-admission screen and the Quality Assurance Audit.	

Adult Residential Licensing

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PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

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	Western Region DEC 2010		<ul style="list-style-type: none"> <u>December 15, 2010</u> All education referred to in the plan of correction will be completed. <u>January 1, 2011</u> Quality Assurance Audits will be instituted. 	

Adult Residential Licensing