

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to LINDA E. BRANDON

LEGAL ENTITY

To operate FAMILY PINES PERSONAL CARE HOME

NAME OF FACILITY OR AGENCY

Located at P.O.BOX 455, 11293 ROUTE 422, ELDERTON, PA 15736

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

No: 426710

Robert E. Robinson

ISSUING OFFICER

R. C. King

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

APR 25 2011

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

Ms. Linda E. Brandon, Administrator
Family Pines Personal Care Home
PO Box 455, 11293 Route 422
Elderton, Pennsylvania 15736

Dear Ms. Brandon:

As a result of the Department of Public Welfare's licensing inspection on February 23, 2011 and March 8, 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

Page 1 of 9

NAME AND ADDRESS OF PERSONAL CARE HOME FAMILY PINES PERSONAL CARE HOME, P O BOX 455 11293 ROUTE 422 ELDERTON, PA 15736		CURRENT LICENSE NUMBER 426710	
INSPECTION DATES (include all dates of the inspection) 02/23/2011		REGIONAL REPRESENTATIVE Dennis Rapon, Joseph Phillips	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Linda E. Brandon</i>			
SIGNATURE OF LEGAL ENTITY <i>Linda E. Brandon</i>	DATE <i>3-4-11</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Joe B. Vanden [initials]</i>	DATE <i>4-13-11</i>

REGULATION 55 Pa.Code §2660	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
31a The home shall provide or arrange for physical site accommodations and equipment necessary to meet the health and safety needs of a resident with a disability and to allow safe movement within the home and exiting from the home.	Resident #14 requires the use of a wheelchair. The home only has one accessible exit for the resident to use on a daily basis and during emergencies. Repeated Violations: 04/28/2010	<i>3-25-11</i>	<i>Deck was added on to the home, which has 3 steps. Ramp shall be added on opposite side by April 3 2011.</i>	<i>4-13-11 [initials]</i>
Western Region	2011			

Adult Residential Licensing

MAR-08-2011 09:38 AM FAMILY, PINES

724 554 4195

P.02

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

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NAME AND ADDRESS OF PERSONAL CARE HOME FAMILY PINES PERSONAL CARE HOME, P O BOX 455 11293 ROUTE #22 ELDERTON, PA 15736		CURRENT LICENSE NUMBER 426710	
INSPECTION DATES (include all dates of the inspection) 02/23/2011		REGIONAL REPRESENTATIVE Dennis Repon, Joseph Phillips	
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>Linda E. Brandon</i>	DATE 3-4-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE 4-13-11

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
89b Hot water temperature in areas accessible to the resident may not exceed 120°F.	On 2/23/11, at or around 2:00pm, the water temperature at the kitchen sink measured 125.4 degrees Fahrenheit. On 2/23/11, at or around 2:00pm, the water temperature in the first floor bathroom measured 125.2 degrees Fahrenheit.	4-8-11	<i>Water temperature has been turned down that it may not exceed 120 F. The administrator or designee will check water temperatures weekly to ensure water temperatures do not exceed 120°F.</i>	4-13-11 <i>g</i>

Western Region

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Adult Residential Licensing

MAR-08-2011 09:39 AM FAMILY PINES

724 354 4195

P.03

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

NAME AND ADDRESS OF PERSONAL CARE HOME FAMILY PINES PERSONAL CARE HOME, P O BOX 455 11293 ROUTE 422 ELDERTON, PA 15736		CURRENT LICENSE NUMBER 426710	
INSPECTION DATES (include all dates of the inspection) 02/23/2011		REGIONAL REPRESENTATIVE Dennis Roop, Joseph Phillips	
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>Linda E. Brandon</i>	DATE 3-4-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE <i>4-13-11</i>

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																																																																	
132f Alternate exit routes shall be used during fire drills.	Exits one and exit two were used for the eight consecutive fire drills conducted from 5/10/10 to 12/9/10. <table border="1"> <thead> <tr> <th>Month</th> <th>Date</th> <th>Time</th> <th>Evac. Time</th> <th>FSE</th> </tr> </thead> <tbody> <tr><td>Jan</td><td>01/15/2010</td><td>02:00 PM</td><td>1 min 30 sec</td><td>Yes</td></tr> <tr><td>Feb</td><td>02/05/2010</td><td>08:00 AM</td><td>1 min</td><td>Yes</td></tr> <tr><td>Mar</td><td>03/09/2010</td><td>09:00 PM</td><td>1 min 30 sec</td><td>Yes</td></tr> <tr><td>Apr</td><td>04/21/2010</td><td>11:00 AM</td><td>45 sec</td><td>Yes</td></tr> <tr><td>May</td><td>05/10/2010</td><td>05:00 AM</td><td>1 min 40 sec</td><td>Yes</td></tr> <tr><td>Jun</td><td>06/10/2010</td><td>01:00 PM</td><td>1 min</td><td>Yes</td></tr> <tr><td>Jul</td><td>07/08/2010</td><td>08:00 AM</td><td>1 min 20 sec</td><td>Yes</td></tr> <tr><td>Aug</td><td>08/23/2010</td><td>04:30 PM</td><td>1 min 15 sec</td><td>Yes</td></tr> <tr><td>Sep</td><td>09/01/2010</td><td>05:00 AM</td><td>1 min 40 sec</td><td>Yes</td></tr> <tr><td>Oct</td><td>10/12/2010</td><td>11:55 AM</td><td>30 sec</td><td>Yes</td></tr> <tr><td>Nov</td><td>11/08/2010</td><td>09:30 AM</td><td>1 min</td><td>Yes</td></tr> <tr><td>Dec</td><td>12/09/2010</td><td>02:00 PM</td><td>45 sec</td><td>Yes</td></tr> </tbody> </table>	Month	Date	Time	Evac. Time	FSE	Jan	01/15/2010	02:00 PM	1 min 30 sec	Yes	Feb	02/05/2010	08:00 AM	1 min	Yes	Mar	03/09/2010	09:00 PM	1 min 30 sec	Yes	Apr	04/21/2010	11:00 AM	45 sec	Yes	May	05/10/2010	05:00 AM	1 min 40 sec	Yes	Jun	06/10/2010	01:00 PM	1 min	Yes	Jul	07/08/2010	08:00 AM	1 min 20 sec	Yes	Aug	08/23/2010	04:30 PM	1 min 15 sec	Yes	Sep	09/01/2010	05:00 AM	1 min 40 sec	Yes	Oct	10/12/2010	11:55 AM	30 sec	Yes	Nov	11/08/2010	09:30 AM	1 min	Yes	Dec	12/09/2010	02:00 PM	45 sec	Yes	3/3/11	<i>alternate route shall be used during fire drills.</i>	<i>4-13-11 g</i>
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Adult Residential Licensing

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

NAME AND ADDRESS OF PERSONAL CARE HOME FAMILY PINES PERSONAL CARE HOME, P O BOX 455 11293 ROUTE 422 ELDERTON, PA 15736		CURRENT LICENSE NUMBER 426710	
INSPECTION DATES (Include all dates of the inspection) 02/23/2011		REGIONAL REPRESENTATIVE Dennis Roper, Joseph Phillips	
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>Linda E. Brandon</i>	DATE	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE 4-13-11

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
history. (7) Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications. (8) Body positioning and movement stimulation for residents, if appropriate. (9) Health status. (10) Mobility assessment, updated annually or at the Department's request.				

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

NAME AND ADDRESS OF PERSONAL CARE HOME FAMILY PINES PERSONAL CARE HOME, P O BOX 455 11293 ROUTE 422 ELDERTON, PA 15736		CURRENT LICENSE NUMBER 426710	
INSPECTION DATES (Include all dates of the inspection) 02/23/2011		REGIONAL REPRESENTATIVE Dennis Rapon, Joseph Phillips	
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>Linda Brandon</i>	DATE 3-4-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE 4-13-11

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
144b The home rules shall specify whether the home is designated as smoking or non-smoking.	The policy and procedure for smoking does not indicate the current designated smoking area.	3-4-11 5-11-11	<i>Smoking policy has been rewritten. The current designated smoking area is on the porch of the deck. All staff persons and residents will be educated on the updated policy. Documentation will be kept. 4-13-11</i>	4-17-11

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Adult Residential Licensing

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

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NAME AND ADDRESS OF PERSONAL CARE HOME FAMILY PINES PERSONAL CARE HOME, P O BOX 455 11293 ROUTE 422 ELDERTON, PA 15736		CURRENT LICENSE NUMBER 426710	
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162c Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.	There were no menu's posted in a public and conspicuous place in the home.	2-24-11	<i>Menu shall be prepared 1 week in advance, stating specific food served. Menu will be posted on door near the kitchen by the administrator</i>	<i>4-13-11</i>

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Adult Residential Licensing

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

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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.	The prescribed medication for resident #1, Albuterol AER, 90mcg, 2- puffs every 4-8 hours as needed was not available in the home for administration. The prescribed medication for resident #2, Robitussin DM syrup, 1- table spoon every 6- hours as needed, was not available in the home for administration.	2-24-11	<i>The prescribed medication for resident #1 on resident #2 has been discontinued. Script from the doctor is in their files. PRN Medication will be on hand, unless doctor has discontinued. A script for the discontinued medication shall be on file. Administrator will review all medication monthly.</i>	4-13-11 Date Initials (DPW)

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Adult Residential Licensing

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

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221c A current weekly activity calendar shall be posted in a conspicuous and public place in the home.	The home does not have a current weekly activity calendar posted in a public and conspicuous place in the home.	2-24-11	<i>Weekly activity shall be posted on kitchen door.</i>	4-13-11 <i>g</i>

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Adult Residential License