

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to ARDEN COURTS OF MONROEVILLE PA, LLC

To operate ARDEN COURTS OF MONROEVILLE

Located at 120 WYNGATE DRIVE, MONROEVILLE, PA 15146

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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To provide Personal Care Homes

The total number of persons which may be cared for at one time may not exceed 56
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 56

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

and shall remain in effect from May 22, 2011 until May 22, 2012,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 435520

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

MAY 12 2011

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

Mr. Barry A. Lazarus, Vice President
Arden Courts of Monroeville PA, LLC
333 North Summit Street
Toledo, Ohio 43604

RE: Arden Courts of Monroeville
120 Wyngate Drive
Monroeville, Pennsylvania 15146

Dear Mr. Lazarus:

As a result of the Department of Public Welfare's licensing inspection on February 28, 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 "Ronald Melusky", with a long horizontal flourish extending to the right.

Ronald Melusky
Acting Director

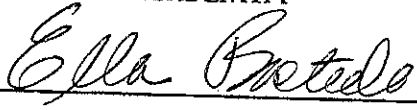
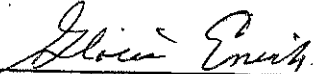
Enclosures
License
Violation Report

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

| | | | |
|---|--|---|---|
| NAME AND ADDRESS OF PERSONAL CARE HOME ARDEN COURTS OF MONROEVILLE, 120 WYNGATE DRIVE MONROEVILLE, PA 15146 | | CURRENT LICENSE NUMBER 435520 | |
| INSPECTION DATES (Include all dates of the inspection) 02/28/2011 | | REGIONAL REPRESENTATIVE Michael Palermo, Serena Chou | |
| PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) ELLA BOSTEDO DIRECTOR | | | |
| SIGNATURE OF LEGAL ENTITY <i>Ella Bostedo</i> | | DATE 3-25-11 | REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Gloria Enrich</i> |
| | | | DATE 5/04/11 |

| 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 |
|--|---|--|---|---|
| 65e Direct care staff persons shall have at least 12 hours of annual training relating to their job duties. | Direct care staff person A received only 10 of the required 12 hours of annual training in the training year from August 2009 through July 2010. PCH Division Central Region Field Office MAR 28 2011 RECEIVED | 5/31/11 AND ONGOING | ED and ASA will AUDIT EMPLOYEE TRAINING RECORDS MONTHLY FOR COMPLIANCE OF REQUIRED TRAINING. ALL EMPLOYEE TRAINING RECORDS WILL BE REVIEWED Staff person A will complete an additional 2 hours of training (plus 12 required hours) in the 2011 training year. GE | Steps have been taken to correct violation; full compliance is not verifiable 5/04/11 GE Date Initials (DFW) |

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

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| INSPECTION DATES (Include all dates of the inspection) 02/28/2011 | | REGIONAL REPRESENTATIVE Michael Palermo, Serena Chou | |
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| SIGNATURE OF LEGAL ENTITY  | DATE 3-25-11 | REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION  | DATE 5/04/11 |

| 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 |
|---|---|--|---|-----------------------------|
| 65g Direct care staff persons, ancillary staff persons, substitute personnel and regularly-scheduled volunteers shall be trained annually in the following areas: (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert. (2) Emergency preparedness procedures and recognition and response to crises and emergency situations. (3) Resident rights (under these | Ancillary staff person B did not receive training in emergency preparedness procedures and resident rights for the 2009/2010 training year. Repeated Violation: 3/16/10, et al | 3-2-11 3/31/11 & ONGOING | STAFF PERSON B RECEIVED TRAINING ON EMERGENCY PREPAREDNESS PROCEDURES AND RESIDENT RIGHTS ED AND ASA WILL AUDIT EMPLOYEE TRAINING RECORDS MONTHLY FOR COMPLIANCE OF REQUIRED TRAINING. | 5/04/11 BE |

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PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

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| 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>Ella Bartolo</i> | DATE 3-25-11 | REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>JE</i> | DATE 5/4/11 |

| 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 |
|---|-----------|--|---|-----------------------------|
| regulations). (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101—10225.5102). (5) Falls and accident prevention. (6) New population groups that are being served at the home that were not previously served, if applicable. | | 3/31/11 AND ONGOING | ED AND ASA WILL AUDIT EMPLOYEE TRAINING RECORDS MONTHLY FOR COMPLIANCE OF REQUIRED TRAININGS | |

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

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| 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>Ella Bortolo</i> | DATE 3-25-11 | REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>John Smith</i> | DATE 5/04/11 |

| 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 |
|---|--|--|--|-----------------------------|
| 183e Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions. | On 2/28/11, three loose pills were found in the first and second drawers of the "Garden Path" medication cart. | 5/11/11 AND ONGOING Immediately | MEDICATION CART AUDIT WILL BE COMPLETED WEEKLY BY RSC OR DESIGNEE The identified pills were discarded at the time of the inspection. - SE | 5/04/11 SE |

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| SIGNATURE OF LEGAL ENTITY <i>Ella Bartolo</i> | DATE 3-25-11 | REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Glenn Smith</i> | DATE 5/04/11 |

| 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 |
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| 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 | <ul style="list-style-type: none"> The medication administration record (MAR) for resident #1 did not include the medication administrator initials for the medication, Omeprazole, noted as given on 2/15/11. Staff person C initiated resident #2's MAR as having given the medication, Megestrol AC SUS 40 mg/ml, on 2/21/11 at 5 PM but had not signed the master key. | 3/7/11 | <p>EMPLOYEE HAS BEEN INSERVICED AND COUNSELED</p> <p>EMPLOYEE HAS BEEN INSERVICED AND COUNSELED</p> <p>RSL OR DESIGNEE WILL AUDIT MARS</p> | <p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>5/04/11-SE Date Initials (DPW)</p> |

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|---|-----------|---|---|-----------------------------|
| 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. | | 3/31/11 ONGOING 3-9-11 3-16-11 | RSC OR DESIGNEE WILL AUDIT MAR'S WEEKLY STAFF HAVE BEEN RE EDUCATED ON POLICY 183 (RSC = RESIDENT SERVICES COORDINATOR) | |