

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to T.A. RAHM

LEGAL ENTITY

To operate FAIRFIELD PERSONAL CARE HOME

NAME OF FACILITY OR AGENCY

Located at 27 KYLE AVENUE, FAIRCHANCE, PA 15436

(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 15, 2011 until April 15, 2012,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 404450

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 14 2011

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

Mr. Terry A. Rahm, Owner/Administrator
T.A. Rahm
Fairfield Personal Care Home
27 Kyle Avenue
Fairchance, Pennsylvania 15436

Dear Mr. Rahm:

As a result of the Department of Public Welfare's licensing inspection on March 2, 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 be 'R. Melusky', followed by a long horizontal line.

Ronald Melusky
Acting Director

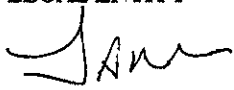
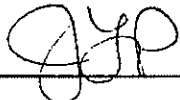
Enclosures
License
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME FAIRFIELD PERSONAL CARE HOME, 27 KYLE AVENUE FAIRCHANCE, PA 15436		CURRENT LICENSE NUMBER 404450	
INSPECTION DATES (Include all dates of the inspection) 03/02/2011		REGIONAL REPRESENTATIVE Tera Newman, Deb McConnell	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>T. A. Rahm, Administration</i>			
SIGNATURE OF LEGAL ENTITY <i>TAR</i>	DATE 3-15-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>J. L. Peggins (JLP)</i>	DATE 4-6-11

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
51/52 Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. §§ 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults). Hiring, retention and utilization of staff persons shall be in accordance with the Older Adult Protective Services Act (35 P. S. §§ 10225.101—10225.5102) and 6 Pa. Code Chapter 15	Staff person A started working in the home on 11/1/10 and performs unsupervised duties in the home. A criminal background was not completed until 2/20/11. Western Region APR 17 2011 Adult Residential Licensing	4-30-11	<i>Staff had a one from previous job. It was from 2008 - gave her the papers to get completed. She didn't send them in on time. I have since received them. I will take care of them myself in the future when hiring ANY new employees.</i> <i>A new staff person document tracking system will be developed and implemented to ensure and track all new staff person required documentation. 3-28-11 JLP</i> <i>New staff persons whom do not have a criminal history check will be supervised and not permitted to work until one is obtained. 3-28-11 JLP</i>	4-6-11 JLP

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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) <i>T. B. Rohry, Administrator</i>			
SIGNATURE OF LEGAL ENTITY 	DATE <i>3-15-11</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE <i>4-6-11</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
(relating to protective services for older adults) and other applicable regulations.	<p style="font-size: 1.2em; margin: 0;">Western Region</p> <p style="margin: 0;">3-7-2011</p> <p style="margin: 0;">Adult Residential Licensing</p>			

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SIGNATURE OF LEGAL ENTITY <i>JAR</i>	DATE 3-15-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>JJP</i>	DATE 4-6-11

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
64c An administrator shall have at least 24 hours of annual training relating to the job duties. The Department-approved administrator training course specified in subsection (a) fulfills the annual training requirement for the first year.	Staff person B, the home's administrator, completed only 10 hours of annual training in the training year for 2010.	4-30-11	<p>Did not know that the ones I had weren't approved. I will check the listing from new ones. I have already completed 6 hrs. toward the 14 hrs. I am short - will complete the remaining hours as soon as possible.</p> <p>An annual staff training plan will be developed for the administrator which will include 8 hrs. training for 2010 training year and 24 hrs. training for 2011 training year.</p> <p align="right">3/28/11 JJP</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p align="center">4-6-11 Date</p> <p align="right"><i>JJP</i> Initials (BPW)</p>
Western Region				
Adult Residential Licensing				

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SIGNATURE OF LEGAL ENTITY <i>T. A. Rahim</i>	DATE 3-15-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>JJP</i>	DATE 4-6-11

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 3/2/11, the water temperature in the sink of the bathroom near the kitchen measured 131 degrees Fahrenheit. On 3/2/11, the water temperature in the sink of the bathroom near the living room measured 126.8 degrees Fahrenheit.		<i>Water temp. was adjusted after inspection (3-2-11) will do a daily check to make sure temp is right. then will do a check more often (weekly) once regulated. Documentation will be kept. 3-28-11 JJP</i>	<div style="text-align: center;"> <p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p><i>JJP</i></p> <p>4/6-11 Date Initials (DPW)</p> </div>
Western Region	Adult Resident			

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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
93a Each ramp, interior stairway and outside steps shall have a well-secured handrail.	The door leading to the laundry room has a step down to enter the room and does not have a handrail. The door is left open and is accessible to the residents.		<i>The handrail was installed on 3-3-11. The door to the Laundry Room was not locked due to use as an emergency exit to outside, step down is only 3 3/4."</i>	4-6-11 <i>JJP</i>
<p>Western Region</p> <p>7-10K</p> <p>Adult Residential Licensing</p>				

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SIGNATURE OF LEGAL ENTITY <i>TAR</i>	DATE <i>3-15-11</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE <i>4-3-11</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
96a The home shall have a first aid kit that includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers.	The first aid kit in the bathroom does not include bandages or eye protection.		<i>Bandages & Eye protection were replaced on 3-2-11. Will keep a better check on it. Also instructed staff to do the same. The administrator or a designated staff member will check the first aid kit 2x per month to ensure that it has all required items in it. 3-28-11 [Signature]</i>	<i>4-3-11 [Signature]</i>

Western Region

7 2011

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124 The home shall notify the local fire department in writing of the address of the home, location of the bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.	Since the notification of resident evacuation needs to the local fire department in 2007, the evacuation needs of the residents has changed by having two residents with mobility needs. The home has not notified the fire department of these changes.	4-30-11	Letter was sent on 3-3-11 to Fire Dept. telling them we now have a change I will keep a better check on it. The administrator will update the fire department when the evacuation assistance needs of the residents change. <u>Copy Encl 2</u>	4-6-11 JYP
Western Region Adult Residential Licensing				

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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
141a The medical evaluation shall include the following: (1) A general physical examination by a physician, physician's assistant or nurse practitioner. (2) Medical diagnosis including physical or mental disabilities of the resident, if any. (3) Medical information pertinent to diagnosis and treatment in case of an emergency. (4) Special health or dietary needs of the resident. (5) Allergies. (6) Immunization	The medical evaluation for resident #1, dated 2/11/11, does not include a list of the resident's medications. The medical evaluation under medications states "see separate order" and there is no attached order. Western Region 11-07-2011 Adult Residential Licensing	<i>4-30-11</i>	<i>Med. Eval. was complete & by Resident's former DR. She has transferred to a new Local DR. Enclosed is new Med. Eval. and Med. List. Will keep a better check when they are reviewed. The administrator will review all resident Medical evaluations to ensure they are completed in their entirety. If an attachment is added to the medical evaluation it will be signed and dated by the physician.</i>	Steps have been taken to correct violation; full compliance is not verifiable <i>4-6-11</i> Date <i>JYP</i> Initials (DPW)

JYP

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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.	The assessment for resident #1 dated 2/2/11 does not list their diagnosis, low sodium diet, or allergy to hydrocodone or PT/OT.	<i>4-30-11</i>	<p><i>Assessment was corrected on 3/3/11. I will be more cautious when doing them. Had them on other forms.</i></p> <p><i>The administrator will compare all resident medical evaluations to the resident's assessment to ensure all pertinent information is carried over to the assessment including the resident's diagnosis. 3-28-11 JJP</i></p>	<i>4-6-11 JJP</i>