

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to CAMBRIDGE VILLAGE ASSOCIATES

To operate CAMBRIDGE VILLAGE ASSISTED LIVING PERSONAL CARE RESIDENCE

Located at 1600 DARLINGTON ROAD, BEAVER FALLS, PA 15010

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 100
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller. (MAXIMUM CAPACITY)

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 24

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: 401620

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

APR 25 2011

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

Ms. Cindy Hopkins, Administrator
Cambridge Village Associates
174 Virginia Avenue
Rochester, Pennsylvania 15074

RE: Cambridge Village Assisted Living Personal Care Residence
1600 Darlington Road
Beaver Falls, Pennsylvania 15010

Dear Ms. Hopkins:

As a result of the Department of Public Welfare's licensing inspection on March 14, 2011 and March 15, 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

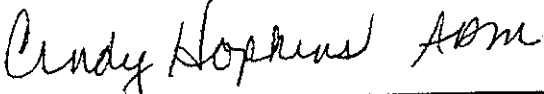

Enclosures
License
Violation Report

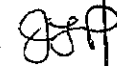
VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa. Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME CAMBRIDGE VILLAGE ASSISTED LIVING PERSONAL CARE RESIDENCE, 1600 DARLINGTON ROAD BEAVER FALLS, PA 15010		CURRENT LICENSE NUMBER 401620	
INSPECTION DATES (Include all dates of the inspection) 03/14/2011, 3/15/11		REGIONAL REPRESENTATIVE Jason Williams, Brenda McAfee	
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>Cindy Hopkins ADM</i>	DATE 3/30/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>J. J. Perzina (JJP)</i>	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
16b The home shall develop and implement written policies and procedures on the prevention, reporting, notification, investigation and management of reportable incidents and conditions.	The home's policy on reportable incidents does not address the prevention or management of incidents.	03/15/11 03/24/11	1. New policy and procedure was written on 03/15/11 to address the prevention or management of incidents. See attach #1 2. Administrator and Designee will meet weekly with Fox Rehab to review incidents. 3. All staff persons were inserviced on 03/24/11 on homes new policy and procedure of reporting, preventions, and management of incidents. See attach #2 4. Administrator will review quarterly at Quality Assurance meeting to maintain compliance.	4-13-11 <i>JJP</i>
<p style="font-size: 24px; font-weight: bold;">Western Region</p> <p style="font-size: 18px;">Page 1 of 17</p> <p style="font-size: 18px;">Confidential Licensing</p>				

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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	Dietary staff person A, hired 9/23/10, does not have a criminal clearance check completed. <div style="text-align: center; font-size: 2em; font-weight: bold; opacity: 0.5;">Western</div> <div style="text-align: center; font-size: 1.5em; font-weight: bold; opacity: 0.5;">MAR 31</div> <div style="text-align: center; font-size: 1.2em; font-weight: bold; opacity: 0.5;">Adult Residential Licensing</div>	03/14/11	1. Criminal History was immediately obtained for Dietary staff person A on 03/14/11. See attach # 3 #3B 2. Facility records indicated Criminal History was faxed on 09/23/10 and was received on 09/24/10 but facility was unable to produce it. 3. Administrator will keep record of new hires mandatory records to maintain compliance and review weekly. See attach #3 4. Administrator will review quarterly at Quality Assurance Meeting to maintain compliance.	4-13-11 

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Western Region				
MAR 31 2011				
Adult Residential Licensing				

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81b Wheelchairs, walkers, prosthetic devices and other apparatus used by residents shall be clean, in good repair and free of hazards. <div style="text-align: right; font-size: 24px; font-weight: bold;">Western Region</div> <div style="text-align: right; font-size: 18px; font-weight: bold;">Mar 31 2011</div> <div style="text-align: right; font-size: 18px; font-weight: bold;">Adult Residential Licensing</div>	Resident #1 and Resident #2 both have transfer bars on their beds. Neither resident has these assistive devices listed in their assessments or support plans.	03/15/11	1. Resident #2 bed cane was removed on 03/15/11. was discharged to another facility on 03/18/11. 2. On Resident #1 bed cane was immediately added to careplan and assessment. See attach # 5 + #5A 3. Educated nursing and therapy staff <i>AND PCA</i> about communication and regulations on bed canes. See attach # 4 4. Administrator or Designee will do weekly checks. Documentation to be kept. See attach # 6 5. Administrator will review quarterly at Quality Assurance meeting for compliance.	<div style="writing-mode: vertical-rl; transform: rotate(180deg); font-size: 10px; font-weight: bold;"> Steps have been taken to correct violation; full compliance is not verifiable 4-13-11 Date Initials (DPW) </div>
	The transfer bar on Resident #2's bed did not have a cover over the opening in the bar which creates an entrapment hazard. (observed on 3/15/11)	03/15/11		
		03/16/11		

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82c Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.	A one gallon bottle of Classic whirlpool disinfectant cleaner was found in the unlocked whirlpool room on the second floor of the home by room 208. The label indicated to call Poison Control if ingested. No residents of the home are assessed to be safe to use or avoid poisonous materials. (observed on 3/14/11)	03/14/11 03/24/11	1. Classic whirlpool disinfectant cleaner was removed immediately. 2. All staff was educated and inserviced on 03/24/11. see attach 附件 3. Administrator or designee will check daily to assure compliance. 4. Administrator will review quarterly at Quality Assurance Meeting for compliance.	
Western Region Adult Residential Licensing				

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100a The exterior of the building and the building grounds or yard shall be in good repair and free of hazards.	The sidewalk leading from the external door across from the Warwick nurses station is not even with the home's yard. There is approximately a 3 inch drop on each side of the sidewalk to the level of the yard which creates a falling hazard. Staff person B, the administrator, indicated that this is used as an emergency evacuation route.	03/16/11	1. On 03/16/11 maintenance put dirt along sidewalk to level it even with yard level. 2. Maintenance will do safety checks to outside building monthly and report immediately to administrator with findings. Documentation will be kept. 3. Administrator will review quarterly at Quality Assurance Meeting for compliance.	4-13-11 <i>[Signature]</i>
<p style="font-size: 1.2em; margin: 0;">Western Region</p> <p style="font-size: 0.8em; margin: 0;">Adult Residential Licensing</p>				

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132d Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.	According to staff persons A and C, the home utilizes the internal stairwells and the home's kitchen as fire safe areas for fire drills. The home's most recent fire inspection letter does not indicate what areas of the building are designated as fire safe areas.	03/18/11 04/07/11	1. Maintenance staff person C took DPW forms to Patterson Township Fire Department to clarify and complete where fire safe areas are. See attach # 10 2. Fire School was also scheduled for 04/07/11 at 6:30 pm by Patterson Township Fire Department. At this time an updated fire inspection letter will be obtained. 3. Administrator/designee/maintenance will monitor fire drills and documentation of drills monthly.	4-13-11 <i>JYP</i>
Western Region				
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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>Andy Hopkins ADM</i>	DATE 3/30/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>JJP</i>	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
171b5 If staff persons or volunteers of the home provide transportation for the residents, the vehicle shall have a first aid kit with the contents in 96.	The home's van which is used for resident transport had a first aid kit that was missing eye coverings, tweezers and a thermometer. (observed on 3/15/11)	03/15/11	<ol style="list-style-type: none"> 1. Eye coverings, tweezers, and thermometer were immediately placed in first aid kit. 2. Activity director will be responsible for first aid kit in bus and report findings to Administrator. Replace usage of products as needed. 3. Administrator will review quarterly at Quality Assurance Meeting for compliance. 	4-13-11 <i>JJP</i>
<p style="font-size: 24px; font-weight: bold;">Western Region</p> <p style="font-size: 18px; font-weight: bold;">Adult Residential Licensing</p>				

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

NAME AND ADDRESS OF PERSONAL CARE HOME CAMBRIDGE VILLAGE ASSISTED LIVING PERSONAL CARE RESIDENCE, 1600 DARLINGTON ROAD BEAVER FALLS, PA 15010		CURRENT LICENSE NUMBER 401620
INSPECTION DATES (Include all dates of the inspection) 03/14/2011, 3/15/11	REGIONAL REPRESENTATIVE Jason Williams, Brenda McAfee	
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>Cindy Hopkins ADM</i>	DATE 3/30/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>
		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
171c The home shall maintain current copies of the following documentation for each of the home's vehicles used to transport residents: (1) Vehicle registration. (2) Valid driver's license for each vehicle operator. (3) Vehicle insurance. (4) Current state inspection. (if vehicle is registered in Pennsylvania) (5) Commercial Driver's License for vehicle operator, if applicable.	The home's van which is used for resident transport did not have a current inspection sticker. The inspection had expired 2/28/2011. <p style="text-align: center; font-size: 1.2em;">Western Region</p> <p style="text-align: center;">Adult Residential Licensing</p>	03/16/11	1. Van was immediately taken to garage for inspection. See attach # 8 2. Maintenance and Administrator will monitor inspection due date. 3. Administrator will review quarterly at Quality Assurance Meeting for compliance.	4-13-11 <i>[Signature]</i>

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

NAME AND ADDRESS OF PERSONAL CARE HOME CAMBRIDGE VILLAGE ASSISTED LIVING PERSONAL CARE RESIDENCE, 1600 DARLINGTON ROAD BEAVER FALLS, PA 15010		CURRENT LICENSE NUMBER 401620	
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SIGNATURE OF LEGAL ENTITY <i>Cindy Hopkins ADM</i>	DATE 3/30/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	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
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	Resident #3 is prescribed Potassium Chloride ER, take one daily. The medication label indicates a strength of 20 meq but the MAR indicated a strength of 10 meq. Resident #4 is prescribed Verapamil 180 mg. The medication label indicates to take 1/2 tab daily but the MAR indicates to take 1 tab daily. (observed on 3/15/11) <p align="center">Western Region</p> <p align="center">Adult Residential Licensing</p>	03/15/11	1. Administrator notified Physician and Pharmacy to verify correct dosage on resident # 4 verapamil. The correct dosage was verapamil 180mg 1/2 tab daily. Pills were cut in half and she was receiving correct dosage. <i>SEE ATTACH #9</i> 2. Administrator spoke with son and told him whenever there is a medication change facility needs a copy of change prior to taking it to outside pharmacy to get filled.	<p align="center">Steps have been taken to correct violation; full compliance is not verifiable</p> <p align="center">Date <u>4/13/11</u> Initials (DFW) <u>[Signature]</u></p>

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

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SIGNATURE OF LEGAL ENTITY <i>Cindy Hopkins ADM</i>	DATE 3/30/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>JSP</i>	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
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	According to staff person B, the administrator, the front door of the home is locked from the inside at night and can only be operated by entering a code into a keypad by the front door. There is also a posted placard by the front door indicating that the door is locked at night. This door is not located within the secure dementia care unit of the home. <p align="center">Western Region</p> <p align="center">Adult Residential Licensing</p>	3/30/11	1. The front door was updated so residents are able to leave through the doors without using the keypad. See attach # 12 2. A motion sensor has been added to the front door to release magnetic lock from the inside for doors to open freely. 3. Alarm has been added to front door to alert staff when lock has been released. 4. Staff was educated on front door update. SEE ATTACH #2 5. Administrator will review quarterly at Quality Assurance Meeting to assure compliance.	4-13-11 <i>JSP</i>

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

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reduces a resident's ability to move his arms, legs, head or other body parts freely, is prohibited.				
<p style="font-size: 24px; opacity: 0.5;">Western Region</p> <p style="font-size: 24px; opacity: 0.5;">April 13, 2011</p> <p style="font-size: 24px; opacity: 0.5;">Adult Residential Licensing</p>				