

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to SOUDERTON MENNONITE HOMES

To operate SOUDERTON MENNONITE HOMES

Located at 207 WEST SUMMIT STREET, SOUDERTON, PA 18964

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

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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 154  
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 22

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 May 17, 2011 until May 17, 2012,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 127760

*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 17 2011

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

Mr. Edward D. Brubaker, President/CEO  
Souderton Mennonite Homes  
207 West Summit Street  
Souderton, Pennsylvania 18964

Dear Mr. Brubaker:

As a result of the Department of Public Welfare's licensing inspection on March 16, 2011 and March 17, 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'.

Ronald Melusky  
Acting Director

Enclosures  
License  
Violation Report

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

Page 1 of 3

NAME AND ADDRESS OF PERSONAL CARE HOME SOUDERTON MENNONITE HOMES, 207 WEST SUMMIT STREET SOUDERTON, PA 18964		CURRENT LICENSE NUMBER 127760	
INSPECTION DATES (Include all dates of the inspection) 03/16/2011		REGIONAL REPRESENTATIVE Sanford Stone, Paul Metzger	
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>Monica Starford</i>	DATE 5/11/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE 5/12/11

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
18 A home shall comply with applicable Federal, State and local laws, ordinances and regulations.	The home was not in compliance with the Boiler and Unfired Pressure Vessel regulations because the "Certificate of Boiler or Pressure Vessel Operation" expired on 02/25/2011.	5/30/11	<p>Boiler parts have been ordered and repairs <del>Have</del> were made on 4/6/11. Repairs were submitted to the Department of Labor and Industry. Waiting period for receiving the Boiler Certificate from the Department of Labor and Industry remain in their control but should anticipate by 5/30/11.</p> <p>Project manager and maintenance staff were educated regarding term "annual" used in the regulations. Maintenance will schedule annual boiler inspection within earlier time frame to allow for any deficiencies to be fixed and Certificate to be sent by the Department of Labor and Industry. Project manager is responsible for maintaining compliance and monitor expiration date.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p style="text-align: right;">Date <u>5/18/11</u> Initials (DPW) <u>[Signature]</u></p>

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PAGE 04/07

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

Page 2 of 3

NAME AND ADDRESS OF PERSONAL CARE HOME SOUDERTON MENNONITE HOMES, 207 WEST SUMMIT STREET SOUDERTON, PA 18954		CURRENT LICENSE NUMBER 127760	
INSPECTION DATES (Include all dates of the inspection) 03/16/2011		REGIONAL REPRESENTATIVE Sanford Stone, Paul Metzger	
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>Monica Starford</i>	DATE 5/11/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE 5/12/11

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
181d If the resident does not need assistance with medication, medication may be stored in a resident's room for self-administration. Medications stored in the resident's room shall be kept locked in a safe and secure location to protect against contamination, spillage and theft.	Medications for resident #1 are kept unlocked in the resident's room and the door to enter the room was not locked during the inspection.	Done at time of inspection.	<div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">Door was locked before leaving room.</div> <div style="border: 1px solid black; padding: 5px; margin-bottom: 5px;">*Resident was educated about locking of medications. Residents are given an option to have a locked box for storage upon admission. *It is reviewed and it is stated in contract. See attached. *Letter was sent to all PC residents as a reminder. See attached * Discussed in PC staff meeting, PC Resident council .See attached * Housekeeping and PC staff to lock door if found opened and notify resident and nursing staff if</div> <div style="border: 1px solid black; padding: 5px;">doors are found unlocked on rounds and medications are sitting out.</div>	5/12/11 <i>Cheron</i>

PC director and PC staff responsible for monitoring compliance.

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PAGE 05/07

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

Page 3 of 3

NAME AND ADDRESS OF PERSONAL CARE HOME SOUDERTON MENNONITE HOMES, 207 WEST SUMMIT STREET SOUDERTON, PA 18964		CURRENT LICENSE NUMBER 127760	
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SIGNATURE OF LEGAL ENTITY <i>Monica Sturgeon</i>	DATE 5-11-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE 5/12/11

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
181c To be considered capable to self-administer medications, a resident shall: (1) Be able to recognize and distinguish his medication. (2) Know how much medication is to be taken. (3) Know when medication is to be taken.	Resident #1's ability to self administer medications was unclear. The 09/13/2010 medical evaluation has blocks checked for 'able to self administer' and 'unable to self administer'. The home's reassessment of the resident's ability to self administer medications on 01/28/2011 indicates that the resident is not capable of self administration. At present the medication is kept in the resident's room and the resident self administers the medications from a "medi-planner" that is prepared by a pharmacy.	Done at time of inspection. Physician was in the building.	Order was received by Primary Care physician for Nursing staff to administer medications. Medications were removed from room. Resident and family notified.  Care Coordinator and nursing staff will continue to perform medication assessments upon any changes with residents and report findings to physician. If physician does not agree with findings, (see attached) Administrator will phone Physician for explanation of maintaining compliance. Administrator will document physicians response. Continue nursing education at staff meetings for criteria to self-administer meds.	5/12/11 <i>Over</i>

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PAGE 06/07