

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to KEYSTONE SERVICE SYSTEMS, INC.

LEGAL ENTITY

To operate REYNOLDS LANE SPECIALIZED PERSONAL CARE

NAME OF FACILITY OR AGENCY

Located at 5250 REYNOLDS LANE, HARRISBURG, PA 17111

(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 June 9, 2011 until June 9, 2012,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **316580**

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.

PW 628 - 01/11



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
PO BOX 2675
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

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

JUN 16 2011

Mr. Michael Grier, CEO
Keystone Service Systems, Inc.
3609 Derry Street
Harrisburg, Pennsylvania 17111

RE: Reynolds Lane Specialized Personal Care
5250 Reynolds Lane
Harrisburg, Pennsylvania 17111

Dear Mr. Grier:

As a result of the Department of Public Welfare's licensing inspection on May 13, 2011, and the corrections you have made after our inspection, we have found the above personal care home to be in compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes). Therefore, a regular license is being issued. Your license is enclosed.

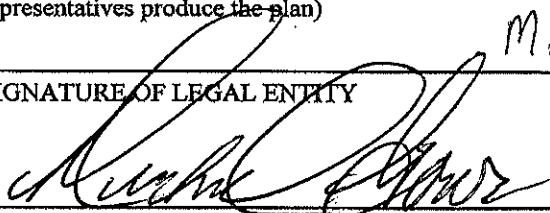
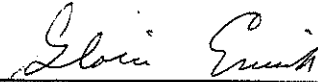
Sincerely,

A handwritten signature in black ink, appearing to read 'R. Melusky'.

Ronald Melusky
Acting Director

Enclosure
License

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

NAME AND ADDRESS OF PERSONAL CARE HOME Reynolds Lane Specialized Personal Care, 5250 Reynolds Lane Harrisburg, PA 17111		CURRENT LICENSE NUMBER 316580	
INSPECTION DATES (Include all dates of the inspection) 05/13/2011		REGIONAL REPRESENTATIVE Palermo, Michael, Lori Gensil	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <p align="center">Michael Grier</p>			
SIGNATURE OF LEGAL ENTITY 	DATE 5-31-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 6/2/11

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
184a The original container for prescription medications shall be labeled with a pharmacy label that includes the following: (1) The resident's name. (2) The name of the medication. (3) The date the prescription was issued. (4) The prescribed dosage and instructions for administration. (5) The name and title of the prescriber.	The home did not have a pharmacy label for resident #1's Novolog Insulin Flexpen as listed on the Medication Administration Record (MAR) to, "inject 4 u AM and 6 u before lunch and supper." The home was using the Novolog flexpen labeled for the sliding scale for the routine dosages. <p align="center">PCH Division Central Region Field Office</p> <p align="center">JUN 3 2011</p> <p align="center">RECEIVED</p>		The program LPN got a separate written order for the standing order for the Novolog Flexpen in the AM, lunch and supper. After getting this separate order a separate Novolog Flexpen was able to be ordered, with its own label. Please see attached documentation. In the future the Program LPN will ensure that all medications listed in the MAR coincide with a medication that is labeled correctly as well as ensuring that all labeled medications are listed in the MAR. To ensure continue compliance the LPN will submit to the Program Administrator a monthly audit verifying all medications have a label and are documented in the MAR.	6/2/11 BE