



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
Norristown State Hospital
1001 Sterigere Street
Bldg 2 Rm. 161
Norristown, Pennsylvania 19401

ADULT RESIDENTIAL LICENSING

1-866-711-4115
610-270-1137

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
Mailing Date: December 29, 2011

Ms. Gail A. Inderwies, ED
Keystone Hospice
8765 Stenton Avenue
Wyndmoor, Pennsylvania 19038

Dear Ms. Inderwies:

As a result of the Department of Public Welfare's licensing inspection on August 30, 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.



Sincerely,


A handwritten signature in black ink that reads "Chevon Miller DR".

Chevon Miller
Regional Licensing Administrator

Enclosure(s)
Violation Report



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


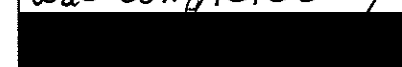

NAME AND ADDRESS OF PERSONAL CARE HOME KEYSTONE HOSPICE, 8765 STENTON AVENUE WYNDMOOR, PA 19038		CURRENT LICENSE NUMBER 127971	
INSPECTION DATES (Include all dates of the inspection) 08/30/2011		REGIONAL REPRESENTATIVE Kim Foulkes, Andrea Kurtz	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Gail A. Inderwies, RN, BSN, MBA, Executive Director</i>			
SIGNATURE OF LEGAL ENTITY 	DATE <i>9/23/11</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE <i>12/20/11</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
121b Doors used for egress routes from rooms and from the building may not be equipped with key-locking devices, electronic card operated systems or other devices which prevent immediate egress of residents from the building, unless the home has written approval or a variance from the Department of Labor and Industry, the Department of Health or the appropriate local building authority.	The first floor exits, second floor back stairwell exit and third floor back stairwell exit has key pad operated locks. The home is unsure if all of the residents are capable of using the key pad locking devices in order to exit from the home. The home does not have written approval from the Department of Labor and Industry, Department of Health, or the local building authority for the locking devices. Repeated Violations: 04/08/2011	<i>9/23/11</i> 	<p><i>Waiver was applied for and response had not been received at time of Aug. 30, 2011 site visit.</i></p> <p><i>Locking devices will be disconnected.</i></p> <p><i>Compliance will be monitored by the Executive Director.</i></p> <p><i>Written approval from the appropriate building codes authority will be obtained before the locks are engaged from the interior to the exterior of the building.</i></p>	<i>12/20/11</i> <i>LAC</i>

*interior to the exterior of the building.
LAC 12/20/11*

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PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

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123d If the home serves one or more residents with mobility needs above or below grade level of the home there shall be a fire-safe area, as specified in writing within the past year by a fire safety expert, on the same floor as each resident with mobility needs.	There are residents on the second and third floor who have mobility needs. Those levels of the home does not have a fire safe area specified in writing within the past year by a fire safety expert. Repeated Violations: <i>04/08/2011</i>	<i>9/23/11</i> 	Copy of our "Fire Evacuation Time / Fire Safe Area Designation" Form dated 9/23/11 is attached and was completed by  P.E. of Arora Engineers.  meets two of the 9 criteria for expertise in completion & signing of the form. Future compliance will be monitored by the Chair, Safety Committee, and the Executive Director	<i>12/20/11</i> <i>UAC</i>

The home will have these areas certified by a fire safety expert each year. UAC 12/20/11