

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to **JENNIFER M MAYHUE**

LEGAL ENTITY

To operate **IDA P. WEITZ PERSONAL CARE HOME**

NAME OF FACILITY OR AGENCY

Located at **3500 MEADOW RUN ROAD, BEAR CREEK, PA 18702**

(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 **18**
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 **November 22, 2011** until **May 22, 2012**,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **223141**

Robert E. Robinson

ISSUING OFFICER

R. C. [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

NOV 22 2011

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

Ms. Jennifer M. Mayhue, Administrator
Ida P. Weitz Personal Care Home
3500 Meadow Run Road
Bear Creek, Pennsylvania 18702

Dear Ms. Mayhue:

As a result of the Department of Public Welfare's licensing inspection on October 25, 2011 of the above personal care home, we have found that your personal care home is in substantial compliance with the regulations, set forth in 55 Pa.Code Ch. 2600 (related to Personal Care Homes), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because this is a new legal entity operating the home.

During the inspection, violations on the enclosed Violation Report were found. All violations specified on the 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.

Your PROVISIONAL license is enclosed, based on substantial but not complete compliance with 55 Pa.Code Ch. 2600.


Sincerely,


A handwritten signature in cursive script that reads "Ronald Melusky" followed by a flourish.

Ronald Melusky
Director

Enclosure
License
Violation Report

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


NAME AND ADDRESS OF PERSONAL CARE HOME WEITZ PERSONAL CARE HOME, 3500 MEADOW RUN ROAD BEAR CREEK TOWNSHI, PA 18702.		CURRENT LICENSE NUMBER 223140	
INSPECTION DATES (Include all dates of the inspection) 10/25/2011		REGIONAL REPRESENTATIVE Meriam O'Malley, Ryan Novak	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) Jennifer Mayhew			
SIGNATURE OF LEGAL ENTITY 	DATE 11-18-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION M. Moskalczyk	DATE 11-18-11


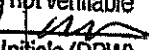
REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
105g2 Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.	There was an accumulation of lint on the ground under the dryer duct and in the vent of the dryer duct that exits the home. This poses a fire hazard.	10/25/11 	10-25-11 the lint on the exterior of the building was raked and brushed away. The exhaust piping was disassembled and found clear of lint. The two yearly cleanings will be documented with the cleaning of our furnaces in June & January. The exterior of the building will be cleaned weekly by auxillary staff and the administrator will make sure this schedule is followed.	Steps have been taken to correct violation; full compliance is not verifiable 11-18-11 MM Date Initials (DPW)

NAME AND ADDRESS OF PERSONAL CARE HOME WEITZ PERSONAL CARE HOME, 3500 MEADOW RUN ROAD BEAR CREEK TOWNSHI, PA 18702		CURRENT LICENSE NUMBER 223140	
INSPECTION DATES (Include all dates of the inspection) 10/25/2011		REGIONAL REPRESENTATIVE Meriann O'Malley, Ryan Novak	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) Jennifer Mayhew			
SIGNATURE OF LEGAL ENTITY <i>JM</i>	DATE 11-18-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE 11-18-11

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
183e Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.	Resident # 1's Twisthaler 220 mcg was not dated. The manufacturer's instructions read discard Twisthaler inhaler 45 days after opening foil pouch or when dose counter reads 00 - whichever comes first.	10-25-11 <i>JM</i>	10-25-11 Resident #1 inhaler was dated according to the doses used. 10-26-11 a reminder was added to the MAR sheets to date inhaler when opening. This topic will also be addressed at med class given by per. admin. The med part will be checked monthly for dates on the inhalers by administrator or staff person holding a current practicum observer certificate	11-18-11 <i>MM</i> Date Initials (DFW)

Steps have been taken to correct violation; full compliance is not verifiable
 11-18-11 *MM*
 Date Initials (DFW)

NAME AND ADDRESS OF PERSONAL CARE HOME WEITZ PERSONAL CARE HOME, 3500 MEADOW RUN ROAD BEAR CREEK TOWNSHI, PA 18702		CURRENT LICENSE NUMBER 223140	
INSPECTION DATES (Include all dates of the inspection) 10/25/2011		REGIONAL REPRESENTATIVE Meriam O'Malley, Ryan Novak	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) Jennifer Mayhew			
SIGNATURE OF LEGAL ENTITY 	DATE 11-18-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION M. Morozalczyk	DATE 11-18-11

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
187d The home shall follow the directions of the prescriber.	Resident #2 medication administration record for Benzotropine 1mg reads take 1 tablet by mouth twice daily. The order from the physician dated 7/1/2010 reads take 1 tablet by mouth three times daily. The home is not following the physician's orders. Resident #1 medication administration record for Albuterol 90/pratrop 18mcg Inhaler reads inhale 1 puff four times daily. The physician changed the order to inhale 2 puffs by mouth as needed. The home is not following the physician's orders.	 10-27-11	On 10/25/11 called resident 1 & 2 physicians to confirm the difference on pharmacy label to DR order. Explain that the pharmacy label needs to be accompanied by a written order. I can only follow the order with written instructions. Received written orders 10/27 change MAR and added orders to the charts 11-1-11 Held class for direct care staff on regulations 2600-181-188 improved our DR communication sheets. Continue ongoing education. Monthly the administrator will check MAR to labels and DR orders. This will also be addressed at our quality management meeting in January.	Steps have been taken to correct violation; full compliance is not verifiable 11-18-11  Date Initials (DPW)