

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to COUNTRY MEADOWS OF HERSHEY ASSOCIATES

To operate COUNTRY MEADOWS OF HERSHEY

Located at 451 SAND HILL ROAD, HERSHEY, PA 17033

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 190
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions: Secure Dementia Care Unit - 55 Pa. Code §§ 2600.231-239 - Capacity 44

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

and shall remain in effect from December 17, 2011 until December 17, 2012,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 342830

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

PHONE: (717) 783-3670

FAX: (717) 783-5662

JAN 12 2012

Mr. David C. Leader, Chief Operating Officer
Country Meadows of Hershey Associates
830 Cherry Drive
Hershey, Pennsylvania 17033

RE: Country Meadows of Hershey
451 Sand Hill Road
Hershey, Pennsylvania 17033

Dear Mr. Leader:

As a result of the Department of Public Welfare's licensing inspection on November 15, 2011 and November 16, 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.

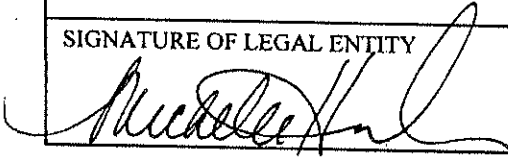
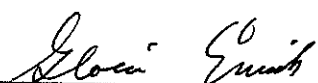
Sincerely,

A handwritten signature in black ink, appearing to be 'R. Melusky', with a long horizontal stroke extending to the right.

Ronald Melusky
Director

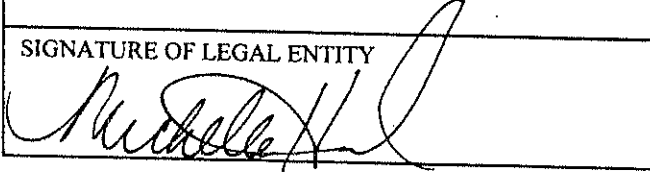
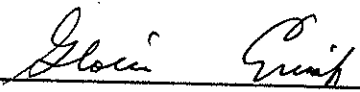
Enclosures
License
Violation Report

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

| | | | |
|---|------------------|--|------------------|
| NAME AND ADDRESS OF PERSONAL CARE HOME COUNTRY MEADOWS OF HERSHEY, 451 SAND HILL ROAD HERSHEY, PA 17033 | | CURRENT LICENSE NUMBER 342830 | |
| INSPECTION DATES (Include all dates of the inspection) 11/15/2011 | | REGIONAL REPRESENTATIVE Lori Gensil, Doug Hoover | |
| 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  | DATE 12/16/11 | REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION  | DATE 12-12-11 |

| 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 |
|--|---|--|--|-----------------------------|
| 25b 25b - The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees. | The contract for resident #1, dated 10/12/10, was not signed by the resident. PCH Division Central Region Field Office DEC 6 2011 RECEIVED | 11/15/11 11/18/11 Ongoing | Resident signed contract on 11/15/11. Executive director conducted in-service with all personnel responsible for resident move-in paperwork. In-service covered proper procedure and compliance for resident signed agreement. The executive director and office staff or designee will conduct random routine audits of resident files. | 12-12-11/EG |

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

| | | | |
|---|-----------------|--|------------------|
| NAME AND ADDRESS OF PERSONAL CARE HOME COUNTRY MEADOWS OF HERSHEY, 451 SAND HILL ROAD HERSHEY, PA 17033 | | CURRENT LICENSE NUMBER 342830 | |
| INSPECTION DATES (Include all dates of the inspection) 11/15/2011 | | REGIONAL REPRESENTATIVE Lori Gensil, Doug Hoover | |
| 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  | DATE 12/6/11 | REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION  | DATE 12-12-11 |

| 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 |
|---|---|--|--|---|
| 231c A written cognitive preadmission screening completed in collaboration with a physician or a geriatric assessment team and documented on the Department's preadmission screening form shall be completed for each resident within 72 hours prior to admission to a secured dementia care unit. | Resident #2 was admitted to the SDU on 6/4/11. The resident's cognitive preadmission screening is dated 5/31/11, more than 72 hours prior to admission. | 11/15/11 | Resident #2 cognitive screening was completed on 5/31/11. Resident #2 signed contract on 6/2/11, which was 72 hours but did not move in until 6/4/11. | Steps have been taken to correct violation; full compliance is not verifiable 12-12-11 BE Date Initials (DPW) |
| | | 11/18/11 | Executive director conducted in-service with all personnel responsible for resident move-in paperwork. In-service covered proper requirement of 72 hour completion of Cognitive screening. | |
| | | Ongoing | The executive director and office staff or designee will conduct random routine audits of resident files. | |