

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to KEYSTONE COMMUNITY MENTAL HEALTH SERVICES

LEGAL ENTITY

To operate MARKET STREET SPECIALIZED COMMUNITY RESIDENCE

NAME OF FACILITY OR AGENCY

Located at 1926 EAST MARKET STREET, YORK, PA 17402

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

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 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 January 27, 2012 until January 27, 2013,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 312380

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

FEB 03 2012

PHONE: (717) 783-3670

FAX: (717) 783-5662

Mr. Michael Grier, CEO
Keystone Community Mental Health Services
3609 Derry Street
Harrisburg, Pennsylvania 17111

RE: Market Street Specialized Community Residence
1926 East Market Street
York, Pennsylvania 17402

Dear Mr. Grier:

As a result of the Department of Public Welfare's licensing inspection on December 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 cursive script that reads "Ronald Melusky" followed by a stylized initial "RM".

Ronald Melusky
Director


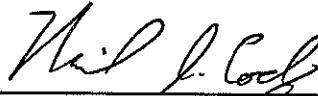
Enclosures
License
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME MARKET STREET SPECIALIZED COMMUNITY RESIDENCE, 1926 EAST MARKET STREET YORK, PA 17402		CURRENT LICENSE NUMBER 312380	
INSPECTION DATES (Include all dates of the inspection) 12/16/2011		REGIONAL REPRESENTATIVE Ron Minnich	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Norman E. Williams, Chief Operating Officer</i>			
SIGNATURE OF LEGAL ENTITY <i>N.E. Williams</i>	DATE 12-30-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Phil S. Goff</i>	DATE 1/24/12


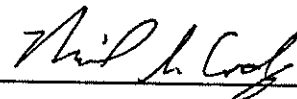
REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
54a Direct care staff persons shall have the following qualifications: (1) Be 18 years of age or older, except as permitted in subsection (b). (2) Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry. (3) Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary personal care	Staff Person A does not have a high school diploma, GED or active status on the nurse aide registry. PCH Division Central Region Field Office JAN 6 2012 RECEIVED	12/16/11	Staff person A is ^{temp-} an agency staff member. The agency has been notified of the issue. The program director told them their options for resolving the issue and they are determining a plan. * Staff member A will not be used at any Keystone Human Services program until the proper proof of education is provided. The program director was informed all staff that have scheduling responsibilities that Staff A is not to be used. This will be monitored through schedules and invoices.	NSC 1/24/12

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

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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
services with reasonable skill and safety.				

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

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187d The home shall follow the directions of the prescriber.	Resident #1's prescribed PRN (as needed) Pro-Air Albuterol was not on hand in the home.	12/30/11	<p>An a weekly basis the LPN will do a count of all PRN medications, ensuring that they are on site and reordered if necessary.</p> <p>The program Administrator will ensure that the counts are completed as required to ensure future compliance with this regulation. Please see the attached count sheet that will be used.</p>	<p style="text-align: center;">Steps have been taken to correct violation; full compliance is not verifiable</p> <p style="text-align: center;">1/24/12 Date</p> <p style="text-align: center;">MJC Initials (DPW)</p>