

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to BROOKDALE SENIOR LIVING COMMUNITIES, INC.

To operate STERLING HOUSE OF PENN HILLS

Located at 7151 SALTSBURG ROAD, PITTSBURGH, PA 15235

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

The total number of persons which may be cared for at one time may not exceed 26
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 March 19, 2012 until March 19, 2013,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 431590

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

MAR 06 2012

Mr. John P. Rijos, Co-President
Brookdale Senior Living Communities, Inc.
Sterling House of Penn Hills
7151 Saltsburg Road
Pittsburgh, Pennsylvania 15235

Dear Mr. Rijos:

As a result of the Department of Public Welfare's licensing inspection on December 29, 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 read 'R. Melusky'.

Ronald Melusky
Director

Enclosures
License
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME STERLING HOUSE OF PENN HILLS, 7151 SALTSBURG ROAD PITTSBURGH, PA 15235		CURRENT LICENSE NUMBER 431590
INSPECTION DATES (Include all dates of the inspection) 12/29/2011	REGIONAL REPRESENTATIVE M. Orme, J. Cutter	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Judy Corralbi</i>		
SIGNATURE OF LEGAL ENTITY <i>Judy Corralbi</i>	DATE 1/31/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION
		DATE

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
51/52 Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. §§ 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults). Hiring, retention and utilization of staff persons shall be in accordance with the Older Adult Protective Services Act (35 P. S. §§ 10225.101—10225.5102) and 6 Pa. Code Chapter 15	Staff person A was hired on 8/24/11. A criminal history background check has not been completed for staff person A.		In accordance with the applicable rules And regulations, Staff Person A had Their criminal background check On August 16, 2011. She began working At the community on August 24, 2011.	

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Western Field Office
Adult Residential Licensing

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

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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 <i>Judy Corrallo</i>	DATE 1/30/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION
		DATE

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
(relating to protective services for older adults) and other applicable regulations.	<p style="font-size: 2em; font-weight: bold;">RECEIVED</p> <p>JAN 31 2012</p> <p>Western Field Office Adult Residential Licensing</p>			

with data

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

NAME AND ADDRESS OF PERSONAL CARE HOME STERLING HOUSE OF PENN HILLS, 7151 SALTSBURG ROAD PITTSBURGH, PA 15235		CURRENT LICENSE NUMBER 431590
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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 <i>Judy Council</i>	DATE 1/30/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Joe B. Kunkel</i>
		DATE 2-15-12

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	Direct care staff person B, hired on 8/29/11, does not have a high school diploma, GED, or active registration status on the PA nurse aide registry.	1-30-12 3-1-12	An audit of all new hires for HS diploma or GED will be done prior to starting work by Executive Director/designee monthly for six months. Staff Person B will be terminated until GED is acquired. <i>The Administrator or designated staff person will review all direct care staff records to assure all direct care staff persons meet the regulated qualifications of 2600.54A.</i> 2-15-12	2-15-12

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Adult Residential Licensing

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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.	<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">RECEIVED</div> <div style="font-size: 1.2em; margin-bottom: 5px;">JAN 31 2012</div> <div style="font-size: 0.8em;">Western Field Office Adult Residential Licensing</div>			

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SIGNATURE OF LEGAL ENTITY <i>Judy Council</i>	DATE 11/30/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE 12-15-12

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65d Direct care staff persons hired after April 24, 2006, may not provide unsupervised ADL services until completion of the following: (1) Training that includes a demonstration of job duties, followed by supervised practice. (2) Successful completion and passing the Department-approved direct care training course and passing of the competency test. (3) Initial direct care staff person training to include the	Direct care staff person A, hired on 8/24/2011, provides unsupervised direct care services; however, staff person A has not completed the Department's online Direct Care Staff Training Course and Competency Test.	1-30-12 y	Staff Person A completed the required competency training on January 5, 2010 At their previous employer. Accordingly Staff Person A completed the competency Training with respect to the community on January 26, 2012. Going forward the Executive Director or designee will audit training files upon hire and monthly to maintain that associates complete necessary training.	2-15-12 y

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PERSONAL CARE HOMES - 55 Pa. Code Chapter 2600

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SIGNATURE OF LEGAL ENTITY <i>Judy C... [Signature]</i>	DATE 1/30/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE 2-15-12

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
following: (i) Safe management techniques. (ii) ADLs and IADLs. (iii) Personal hygiene. (iv) Care of residents with dementia, mental illness, cognitive impairments, mental retardation and other mental disabilities. (v) The normal aging-cognitive, psychological and functional abilities of individuals who are older. (vi) Implementation of the initial assessment, annual	RECEIVED JAN 31 2012 Western Field Office Adult Residential Licensing	3-1-12	The Administrator or Designated State Prison will review all direct care staff prison records to ensure all direct care staff prisons meet the requirements of 2600.65d prior to providing unsupervised ADL services. 2-15-12	

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SIGNATURE OF LEGAL ENTITY <i>Judy Carroll</i>	DATE 1/30/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION DATE 2-15-12

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assessment and support plan. (vii) Nutrition, food handling and sanitation. (viii) Recreation, socialization, community resources, social services and activities in the community. (ix) Gerontology. (x) Staff person supervision, if applicable. (xi) Care and needs of residents with special emphasis on the residents being served in the home. (xii) Safety management and hazard prevention.	<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">RECEIVED</div> <div style="font-size: 1.2em;">JAN 31 2012</div>			

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Adult Residential Licensing

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SIGNATURE OF LEGAL ENTITY <i>Judy Corvial</i>	DATE 1/30/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION DATE 8-2-15-12

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
(xii) Universal precautions. (xiv) The requirements of this chapter. (xv) Infection control. (xvi) Care for individuals with mobility needs, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration, if applicable to the residents served in the home. (6) Smoke detectors and fire alarms. (7) Telephone use and notification of emergency services.	<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">RECEIVED</div> <div style="font-size: 1.2em; margin-bottom: 10px;">JAN 31 2012</div> <div style="font-size: 0.8em;">Western Field Office Adult Residential Licensing</div>			

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SIGNATURE OF LEGAL ENTITY	DATE	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE
<i>Judy Cavallo</i>	<i>1/30/12</i>		<i>2-15-12</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
85a Sanitary conditions shall be maintained.	The inside of the commode bowl in the bathroom of bedroom #14 was covered in mold.	<i>1-30-12 g</i>	Toilet bowl in room 14 was cleaned on December 29, 2011. Resident Care Coordinator or designee will monitor the cleanliness of the toilet for four(4) weeks to verify cleanliness of bathroom.	<i>2-15-12 g</i>
<p>RECEIVED</p> <p>JAN 31 2012</p>				

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105g1 To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.	Both of the home's clothes dryers have more than one inch of lint in the lint traps.	<i>1-30-12</i> <i>3-15-12</i>	<p style="text-align: center;">r to maintain compliance with</p> <p>With the appropriate requirements, the Maintenance Technician or designee Will monitor the community's clothes Dryers on a daily basis for the next Four (4) weeks to maintain lint is removed appropriately.</p> <p><i>All staff persons using the home's clothes dryers will be educated on the requirements of lint removal. Documentation of education will be kept. 2-15-12</i></p>	<i>2-15-12</i>

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SIGNATURE OF LEGAL ENTITY <i>Judy Cavall</i>	DATE <i>1/30/12</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE <i>2-15-12</i>

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107a The administrator shall have a copy and be familiar with the emergency preparedness plan for the municipality in which the home is located.	Staff person C, the administrator, does not have the emergency preparedness plan for the local municipality.	<i>1-30-12 ✓</i>	The Emergency Management Coordinator requesting a copy of the Emergency Evacuation Plan. Subsequently on January 30, 2012 [REDACTED] spoke with the Emergency Management Coordinator for Penn Hills wherein the plan will be faxed to the Community by the end of the day on February 1, 2012. The Executive Director Or designee will call the Applicable agency for a updated plan annually.	<i>2-15-12 ✓</i>

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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
132f Alternate exit routes shall be used during fire drills.	The fire drill record for January through July and September through November of 2011 indicates that only the front and rear exit were used for the fire drill evacuation routes.	1-30-12	While the community only has two Evacuation routes, the Executive Director or designee will utilize alternate routes as applicable and in accordance with the applicable requirements.	Steps have been taken to correct violation; full compliance is not verifiable 2-15-12 Date Initials (DPW)
		3-1-12	The Administrator or designated staff person will monitor the fire drill record monthly to ensure alternate exits are used for fire drills. 2-15-12	

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132h Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.	Resident #2 did not evacuate to the home's designated meeting place or to a fire safe area during the fire drills of 5/27/11, 9/30/11 and 10/26/11.	1-30-12 3-16-12	During the aforementioned evacuations Resident 2 was in the hospital. Going Forward, the Executive Director or Designee will specify on the Fire Drill Log when and why a resident did not Participate in the drill. <i>All staff persons involved with security fire drill documentation will be educated on the requirements of regulations 2600.132b and 2600.132c. Documentation activity will be kept. 2-15-12</i>	Steps have been taken to correct violation; full compliance is not verifiable Date: <u>2-15-12</u> Initials: <u>DP</u>

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SIGNATURE OF LEGAL ENTITY <i>John Cavallo</i>		DATE <i>1/30/12</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>g</i>
			DATE <i>2-18-12</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
143a The home shall have a written emergency medical plan that includes the following: (1) The hospital or source of health care that will be used in an emergency. This shall be the resident's choice, if possible. (2) Emergency transportation to be used. (3) An emergency-staffing plan.	The home's emergency medical plan does not include emergency staffing plan. <div style="text-align: center; font-weight: bold; font-size: 1.2em;">RECEIVED</div> <div style="text-align: center;">JAN 31 2012</div>	3-15-12 3-15-12	Emergency medical staffing plan according to disaster manual is attached. <i>The administrator or designee for staff person will develop an emergency-staffing plan in accordance with regulation 143a. (emergency medical plan). 2-15-12. All staff persons will be educated on the 2600.143a. emergency staffing plan. Documentation will be kept. 2-15-12 y</i>	Steps have been taken to correct violation; full compliance is not verifiable <i>2-15-12</i> Date <i>ll</i> Initials (DPW)

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190a A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.	Staff person A administers medications to residents of the home. Staff person a has not completed Department-approved medications administration course that includes the passing of the Department's performance-based competency test provided by a certified Train-the-Trainer.		Pursuant to the applicable requirements Staff Person A completed the Medication Course on November 9, 2009. Documentation is attached for your review.	

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SIGNATURE OF LEGAL ENTITY <i>Judy Carroll</i>	DATE <i>1/30/12</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE <i>2-15-12</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
225a A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.	Resident #3's assessment, dated 7/18/11, indicates the resident has no visual impairment; however, resident #3's medical evaluation, dated 7/18/11, indicated the resident has macular degeneration. Resident #4 has an assessment completed; however, the assessment is not dated.	<i>1-30-12 g</i>	Health and Wellness Director or designee will audit assessments upon completion and monthly for six(6) months to verify that both the medical evaluation and assessment are completed appropriately. To assist with compliance the Health and Wellness Director or designee will audit assessments upon completion and monthly for six (6) months to verify all appropriate information has been obtained.	<i>2-15-12 g</i>

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2-15-12

Resident #3's and #4's records were updated. 2-15-12 g

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

NAME AND ADDRESS OF PERSONAL CARE HOME STERLING HOUSE OF PENN HILLS, 7151 SALTSBURG ROAD PITTSBURGH, PA 15235		CURRENT LICENSE NUMBER 431590	
INSPECTION DATES (Include all dates of the inspection) 12/29/2011		REGIONAL REPRESENTATIVE M. Orme, J. Cutter	
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 <i>Judy Conall</i>	DATE 1/30/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE 2-15-12

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
227g Individuals who participate in the development of the support plan shall sign and date the support plan.	Resident #5 participated in the development of their support plan on 2/1/11; however, the resident did not sign the support plan.	1-30-12 2-15-12	In an effort to maintain compliance With this requirement, the Health And Wellness Director or designee Will audit the Resident Support Plan upon completion and monthly to verify appropriate signatures are received timely. <i>Resident #5's support plan was signed by the resident, 2-15-12</i>	2-15-12

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