



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
100 LACKAWANNA AVENUE
ROOM 330, SCRANTON STATE OFFICE BUILDING
SCRANTON, PENNSYLVANIA 18503-1923

ADULT RESIDENTIAL LICENSING

PHONE: (570) 963-3209
1-800-833-5095
FAX: (570) 963-3018

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: February 13, 2012

Mr. George Loudon, Owner
Grace Park, LTD
4694 Lower Cherry Valley Road
Stroudsburg, Pennsylvania 18360

RE: Grace Park
1170 West Main Street
Stroudsburg, Pennsylvania 18360

Dear Mr. Loudon:

As a result of the Department of Public Welfare's licensing inspection on January 10, 2012 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,

Michele Moskalczyk
Regional Licensing Administrator

Enclosure
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME GRACE PARK, 1170 WEST MAIN STREET STROUDSBURG, PA 18360		CURRENT LICENSE NUMBER 207360	
INSPECTION DATES (Include all dates of the inspection) 01/10/2012		REGIONAL REPRESENTATIVE Ryan Novak, Ann O'Haire	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>MARY JANE DUGAS, Executive Director</i>			
SIGNATURE OF LEGAL ENTITY <i>Mary Jane Dugas</i>	DATE <i>2/1/2012</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. M. Skolysz</i>	DATE <i>2/10/12</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
81a The home shall provide or arrange for physical site accommodations and equipment necessary to meet the health and safety needs of a resident with a disability and to allow safe movement within the home and exiting from the home.	On 12/26/11 Resident #1 whom resides on the homes secure dementia unit was found with the window opened and hanging out a second floor window in Resident #1's bedroom. The home failed to meet the health and safety needs of Resident #1 as a result of not having adequate equipment to secure the windows in the homes second floor secure dementia unit. RECEIVED FEB 03 2012 SCRANTON FIELD OFFICE Adult Residential Licensing	<i>12/26/11</i>	On 12/26/2011 the physical site accommodations were implemented. While resident #1 had lived here for over a year and had not demonstrated this type of behavior, I am happy that our scaffolding pattern allowed for enhanced care that prevented a true emergency! We have placed modifications to all windows in secure care as of 12/26/11 to limit the opening to approx. 4 inches. This was observed at inspection on 1/10/2012. Further incidents of this nature will not occur.	<i>2/10/12</i>

Steps have been taken to correct violation, full compliance is not verifiable
Date *2/10/12* Initials (DPW) *MJ*