

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to HOMEWOOD AT MARTINSBURG, INC.

To operate HOMEWOOD AT MARTINSBURG

Located at 437 GIVIER DRIVE, MARTINSBURG, PA 16662

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 101
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 15

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 31, 2012 until March 31, 2013,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 360110

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

APR 10 2012

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

Ms. Arlene E. Clark, Executive Director
Homewood at Martinsburg, Inc.
Homewood at Martinsburg
437 Givier Drive
Martinsburg, Pennsylvania 1662

Dear Ms. Clark:

As a result of the Department of Public Welfare's licensing inspection on March 12, 2012 and March 13, 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.

In addition, as a result of your personal care home's recent adjustment of the use of physical space, we are revising your licensed capacity. A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

Sincerely,

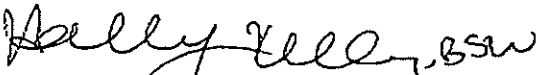

A handwritten signature in cursive script that reads "Ronald Melusky" followed by a flourish.

Ronald Melusky
Director


Enclosures
License
Violation Report

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

No. 1990 P. 3

NAME AND ADDRESS OF PERSONAL CARE HOME HOMEWOOD AT MARTINSBURG, 437 GIVIER DRIVE MARTINSBURG, PA 16662		CURRENT LICENSE NUMBER 360110	
INSPECTION DATES (Include all dates of the inspection) 03/12/2012, 3/13/12		REGIONAL REPRESENTATIVE 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 3/20/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 3/27/12

Mar. 21. 2012 2:46AM

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
84 Heat sources, such as steam and hot heating pipes, water pipes, fixed space heaters, hot water heaters, and radiators, exceeding 120°F that are accessible to the resident, shall be equipped with protective guards or insulation to prevent the resident from coming in contact with the heat source.	On 3/12/12, the hallway heater at the end of the corridor next to the outside exit measured at 140.1 degrees Fahrenheit. There were no protective guards to prevent residents from coming into direct contact with the heater. PCH Division Central Region Field Office MAR 20 2012 RECEIVED	03/12/12 Guards installed 3/20/12	The control knob was removed from the heater to prevent persons from turning the heater temperature up to an unsafe temperature of over 120°. Guards are being made by Martin Welding and upon completion of the guards, they will be placed on the heater. Maintenance will monitor the temperature of the heater monthly to ensure temperature does not exceed 120°F.	3/30/12 

RECEIVED TIME MAR. 20. 2:10PM

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

No. 1990 P. 4

NAME AND ADDRESS OF PERSONAL CARE HOME HOMEWOOD AT MARTINSBURG, 437 GIVIER DRIVE MARTINSBURG, PA 16662		CURRENT LICENSE NUMBER 360110	
INSPECTION DATES (Include all dates of the inspection) 03/12/2012, 3/13/12		REGIONAL REPRESENTATIVE 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 <i>Dorey Kelly, BSU</i>	DATE 3/20/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cybil Bomsor</i>	DATE 3/27/12

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
85d Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.	On 3/12/12, the trash can next to the sanitation/dishwasher area in the kitchen was uncovered.	03/12/12	Trash can lid was replaced as soon as it was noticed. To prevent further violation, staff will be inserviced on the regulation and the importance of preventing insects and rodents from entering the kitchen. Food Service Manager will spot check and monitor trash cans to ensure lids are on trash cans.	<div style="text-align: right;"> Steps have been taken to correct violation; full compliance is not verifiable. <i>3/27/12</i> Date Initials (DPW) </div>

Mar. 21. 2012 2:46AM

RECEIVED TIME MAR. 20. 2:10PM

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

No. 1990 P. 5

NAME AND ADDRESS OF PERSONAL CARE HOME HOMEWOOD AT MARTINSBURG, 437 GIVIER DRIVE MARTINSBURG, PA 16662		CURRENT LICENSE NUMBER 360110	
INSPECTION DATES (Include all dates of the inspection) 03/12/2012, 3/13/12		REGIONAL REPRESENTATIVE 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 <i>Avery Keller, BSW</i>	DATE 3/20/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cybil Bomberg</i>	DATE 3/27/12

Mar. 21. 2012 2:46AM

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:
87 The home's rooms, hallways, interior stairs, outside steps, outside doorways, porches, ramps, evacuation routes, outside walkways and fire escapes shall be lighted and marked to ensure that residents, including those with vision impairments, can safely move through the home and safely evacuate.	There was no outside lighting for the exit across from the courtyard in the "Waterside" secured dementia care unit.	03/21/12	Wall mounted light has been installed on the exterior wall outside the exit across from courtyard in secured dementia unit. Maintenance will monitor exit lighting of the secured dementia unit once a month to ensure lighting is provided and in proper working order.	3/30/12 <i>CB</i>

RECEIVED TIME MAR. 20. 2:10PM

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

NAME AND ADDRESS OF PERSONAL CARE HOME HOMEWOOD AT MARTINSBURG, 437 GIVIER DRIVE MARTINSBURG, PA 16662		CURRENT LICENSE NUMBER 360110	
INSPECTION DATES (Include all dates of the inspection) 03/12/2012, 3/13/12		REGIONAL REPRESENTATIVE 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 <i>Sally Korman, BSW</i>	DATE 3/20/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cybil Amber</i>	DATE 3/27/12

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
121a Stairways, hallways, doorways, passageways and egress routes from rooms and from the building shall be unlocked and unobstructed.	On 3/13/12, there was a dining room chair partially obstructing the outside exit during lunch in the dining room.	03/19/12	The dining room chair was immediately moved from the door way and placed back at a dining room table. The chair is not kept there. It is uncertain if a resident or staff member placed the chair in the door way. The administrator will educate residents at resident council that chairs cannot be placed in front of stairways, hallways, doorways, passage ways, and egress routes. The administrator will educate staff at the next staff meeting of the same regulation requirements. The Assisted Lifestyle Service Staff Administrator and Food Service Manager will monitor the dining room for any future occurrences or need to reconfigure seating arrangements.	Steps have been taken to correct violation; full compliance is not verifiable <u>3/27/12</u> <i>CB</i> Date Initials (DPW)

RECEIVED TIME MAR. 20. 2:10PM

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Mar. 21. 2012 2:46AM

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

NAME AND ADDRESS OF PERSONAL CARE HOME HOMEWOOD AT MARTINSBURG, 437 GIVIER DRIVE MARTINSBURG, PA 16662		CURRENT LICENSE NUMBER 360110	
INSPECTION DATES (Include all dates of the inspection) 03/12/2012, 3/13/12		REGIONAL REPRESENTATIVE 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 <i>Debra Koenig, BSW</i>	DATE 3/20/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cybil Ambrose</i>	DATE 3/27/12

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
184b If the OTC medications and CAM belong to the resident, they shall be identified with the resident's name.	There were two medications in the medication cart that were not labeled with resident names specifically; <i>Vitamin D3 1000</i> and <i>Alendronate, 70 mg. sodium tablets.</i>	03/12/12	Vitamin D3 and Alendronate were labeled with resident names (see photos). All staff have been inserviced on the need to label over the counter and complementary and alternative medicine medications (see attached). Community nursing will audit monthly to ensure all over the counter and complementary and alternative medicine medications are labeled and identified with resident's name.	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p><i>BB/ia JB</i></p> <p>Date Initials (DPW)</p>

RECEIVED TIME MAR. 20. 2:10PM

No. 1990 P. /

Mar. 21. 2012 2:47AM