

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to NEW HOPE GRACIOUS SENIOR COMMUNITY

LEGAL ENTITY

To operate NEW HOPE GRACIOUS PERSONAL CARE

NAME OF FACILITY OR AGENCY

Located at 300 UNION AVENUE, AVALON, PA 15202

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

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 75  
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 April 4, 2012 until April 4, 2013,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **432100**

*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.

PW628 - 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

APR 26 2012

Mr. Scott A. Farabaugh, Administrator  
New Hope Gracious Senior Community  
New Hope Gracious Personal Care  
300 Union Avenue  
Avalon, Pennsylvania 15202

Dear Mr. Farabaugh:

As a result of the Department of Public Welfare's licensing inspection on March 29, 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.

The license indicates the home's recent change in the name from New Hope Assisted Living to New Hope Gracious Personal Care and the home's recent change in the name of the legal entity from New Hope Assisted Living, Inc. to New Hope Gracious Senior Community.

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 flourish.


Ronald Melusky  
Director

Enclosures  
License  
Violation Report

VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa Code Chapter 1204

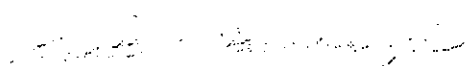

Page 1 of 2

NAME AND ADDRESS OF PERSONAL CARE HOME NEW HOPE Gracious Personal Care, 380 LINCOLN AVENUE AVALON, PA 15202		CURRENT LICENSE NUMBER 432100	
INSPECTION DATES (include all dates of the inspection) 05/29/2012		REGIONAL REPRESENTATIVE Dennis Roper, Kathy Kruppa	
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 	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 4-19-12

REGULATION 55 Pa. Code §2600	VIOLATION	DATE	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
17 Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's	On 3/29/12 at 8:40 a.m. a note book consisted of personal information on residents' diets, nutrition reports and summary's of each residents support plans was sitting on top of a cart in the bathroom across resident room D. The notebook contained information regarding residents' #1, #2, #3, #4, #5, #6, #7 and #8.  <b>RECEIVED</b>  APR 18 2012  Western Field Office Adult Residential Licensing	4/30/12	On 3/29/12, the administrator removed the note book from the cart and placed it in an office that is locked when not occupied by a staff person who has a professional need to know confidential information.  In order to ensure ongoing compliance, all staff persons shall be required to read "Confidentiality of Resident Records" by April 30, 2012 (see Attachment 1). This document has also been added to the New Hire Training Program.  When the administrator, or his designee perform the daily walk-through, he or she shall ensure that confidential information is secure.	Steps have been taken to correct violation; full compliance is not verifiable 4-19-12 Date  (Initials (DPW))

VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa Code Chapter 2600

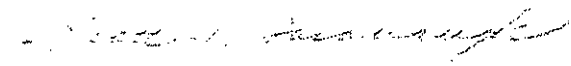
Page 2 of 7

NAME AND ADDRESS OF PERSONAL CARE HOME NEW HOPE Gracious Personal Care, 390 UNION AVENUE AVALON, PA 15262		CURRENT LICENSE NUMBER 432103	
INSPECTION DATES (include all dates of the inspection) 03/29/2012		REGIONAL REPRESENTATIVE Dennis Ropon, Kathy Kruppa	
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 	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE 4-19-12

REGULATION 55 Pa. Code §2600	VIOLATION	DATE	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
designated person, or if a court orders disclosure.	<div style="font-size: 2em; font-weight: bold; margin-bottom: 10px;">RECEIVED</div> <div style="font-size: 1.2em; margin-bottom: 10px;">APR 18 2012</div> <div style="font-size: 0.8em;">Western Field Office Adult Residential Licensing</div>			

VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa Code Chapter 2403

Page 1 of 7

NAME AND ADDRESS OF PERSONAL CARE HOME NEW HOPE Gracious Personal Care, 500 UNION AVENUE AVALON, PA 15202		CURRENT LICENSE NUMBER 432100	
INSPECTION DATES (include all dates of the inspection) 03/29/2012		REGIONAL REPRESENTATIVE Dennis Kopca Kathy Kruppa	
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 7/1/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE 6-4-12

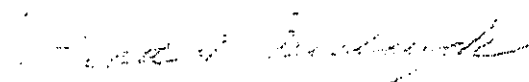
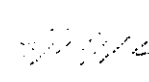
REGULATION 55 Pa.Code §2600	VIOLATION	DATE	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
54a Direct care staff persons shall have the following qualifications: (1) Be 18 years of 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 A, does not have a high school diploma, GED or and is not on the active Pa nurse aide registry list.	4/12/12	Staff person A is a highly skilled and valued member of New Hope's Resident Care Department.  We have initiated registration for her GED and anticipate successful completion within a few weeks. (see attachments 2,3,4).  In order to ensure ongoing compliance, the Human Resource Director has been informed of the necessity of ensuring that new hires provide documentation fulfilling the staff education requirements of the DPW, prior to the first day of work.	<p><b>Steps have been taken to correct violation; full compliance is not verifiable</b></p> <p>4-19-12 Date Initials (DPW) <i>SC</i></p>

RECEIVED

APR 18 2012

Western Field Office  
Adult Residential Licensing

VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME NEW HOPE Gracious Personal Care, 306 UNION AVENUE AVALON, PA 15202		CURRENT LICENSE NUMBER 432100	
INSPECTION DATES (Include all dates of the inspection) 03/29/2012		REGIONAL REPRESENTATIVE Dennis Rapon, Kathy Kruppa	
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REGULATION 55 Pa.Code §2600	VIOLATION	DATE	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="border: 1px solid black; padding: 10px; width: fit-content; margin: 0 auto;"> <p style="font-size: 24px; margin: 0;"><b>RECEIVED</b></p> <p style="font-size: 18px; margin: 0;">APR 13 2012</p> </div>			

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

Page No. 1

NAME AND ADDRESS OF PERSONAL CARE HOME NEW HOPE Gracious Personal Care, 300 UNION AVENUE AVALON, PA 15202		CURRENT LICENSE NUMBER 432100	
INSPECTION DATES (Include all dates of the inspection) 03/29/2012		REGIONAL REPRESENTATIVE Dennis Rupon, Kathy Kruppa	
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>[Signature]</i>	DATE 3/29/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE 4-19-12

REGULATION 55 Pa.Code §2600	VIOLATION	DATE	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
83a The indoor temperature, in areas used by the residents, shall be at least 70°F when residents are present in the home.	On 3/29/12 at approximately 10:00 a.m. resident #11's room measured 63.4 degrees Fahrenheit.	3/30/12	<p>New Hope's contractual provider A-Air, was called and the system was repaired the day after the DPW annual inspection.</p> <p>New Hope's HVAC system is properly maintained on an ongoing basis but, like any other system, may occasionally break down. Whenever the system is not working properly, A-Air is called.</p> <p>If a Resident is uncomfortable when the HVAC malfunctions in the section of the building where he or she resides, he or she is welcome to use the common areas of other sections of the building. If it is during sleeping hours, the Resident may be temporarily assigned to another vacant room or, depending upon circumstances, may be made comfortable with additional blankets.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>4-19-12 Date Initials (DPW)</p>

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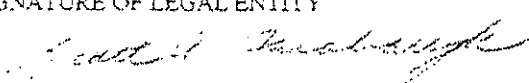
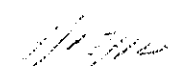
Western Field Office  
Adult Residential Licensing

4-30-12

*The administrator or designated staff person will monitor temperatures in the home weekly to ensure the temperature is at least 70°F when residents are in the home. 4-19-12*

VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa Code Chapter 2600

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NAME AND ADDRESS OF PERSONAL CARE HOME NEW HOPE Gracious Personal Care, 300 UNION AVENUE AVALON, PA 15202		CURRENT LICENSE NUMBER 432100	
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REGULATION 55 Pa.Code §2600	VIOLATION	DATE	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
183b Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.	<p>On 3/29/12 at 8:40 a.m. resident's #10's prescribed ciclopirox 0.77% 15mg and jointflex were unlocked and accessible on a cart in the bathroom across from resident room D.</p> <p>On 3/29/12 at 8:40 a.m. resident #11's prescribed zinc oxide ointment and prescribed voltaren 1% gel were unlocked and accessible on a cart in the bathroom across from resident room D.</p>	4/30/12	<p>On 3/29/12, the administrator personally instructed the caregiver at fault to return the medications to the medication cart and lock it. He verbally reminded her about regulation 183b and the necessity of securing ALL prescription and OTC medications as well as syringes.</p> <p>In order to ensure ongoing compliance, all staff person shall be required to read the "Proper storage of Medications" by April 30, 2012 (see attachment). This document has also been added to the New Hire Training Program.</p> <p>When the administrator, or his designee perform the daily walk-through, he or she shall ensure that all medications are in locked areas or contain-</p>	4-19-12

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

Page 1 of 1

NAME AND ADDRESS OF PERSONAL CARE HOME NEW HOPE Gracious Personal Care, 300 UNION AVENUE AVALON, PA 15202		CURRENT LICENSE NUMBER 432160	
INSPECTION DATES (Include all dates of the inspection) 03/29/2012		REGIONAL REPRESENTATIVE Dennis Rapon, Kathy Kruppa	
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SIGNATURE OF LEGAL ENTITY <i>[Signature]</i>	DATE 4/19/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION	DATE 4-19-12

REGULATION 55 Pa. Code §2600	VIOLATION	DATE	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
227a A resident requiring personal care services shall have a written support plan developed and implemented within 30 days of admission to the home. The support plan shall be documented on the Department's support plan form.	Resident #16's support plan, dated 7/7/11, indicates the resident is mobile; however, the resident's medical evaluation, dated 7/5/11, indicates the resident is immobile.	4/18/12	Resident #16 ambulates safely with a walker. Therefore, on 4/18/12, [redacted] RN, who coordinates DMEs and completes all RASPs asked Resident #16's physician to complete a new DME to correctly reflect the Resident's mobility needs (see attachment 7).  In order to ensure ongoing compliance, [redacted] was reminded, in writing, to accurately prepare RASPs based on the DME. If, at any time, she believes the DME is incorrect, she should contact the physician and request that she or he amend the DME (see attachment 8).  <i>prepared a new RASP based upon the new DME</i>	

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Western Field Office  
 Adult Residential Licensing

5-15-12

*The Admin is to refer or designated STATE prison with review all current support plans for accuracy including resident mobility status. 4-19-12*