



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: June 21, 2012**

Mr. Edward C. Pitchford, CEO  
Hendorn, Inc.  
Cole Manor  
101 Maple Street  
Coudersport, Pennsylvania 16915

Dear Mr. Pitchford:

As a result of the Department of Public Welfare's licensing inspection on April 18, 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.


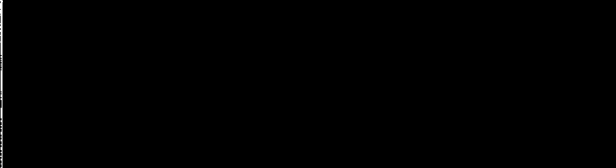
All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

Sincerely,

*Anne Graziano*  
Regional Licensing Administrator

Enclosure  
Violation Report

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

PCH Name: COLE MANOR		License Number: 242630
Address: 101 MAPLE STREET, COUDERSPORT, PA 16915		County: Potter
Administrator: Vida Glover		Region: NORTH
Legal Entity Name: HENDORN INC		
Legal Entity Address: 101 MAPLE STREET, COUDERSPORT, PA 16915		
Certificate(s) of Occupancy Other 10/21/1987 L&I		
Staffing Hours Resident Support: NM Total Daily Staff: 22 Waking Staff: 17		
Type of Inspection: Partial		BHA Docket Number: Notice: Unannounced
Reason(s) for inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 04/18/2012: Patton, Leslie		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details Partial or Full Triggers: NA Random Indicators:		
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 30 Number of Residents Served: 19 Secured Dementia Care Unit in Home: NO Area: Secured Dementia Unit Capacity, If Applicable:	Number of Residents who: 	
		

Violation Report: 24263 - 04/18/2012 - Patton, Leslie

1. REGULATION 55 Pa. Code §2600

2600.123(d) - If the home serves one or more residents with mobility needs above or below grade level of the home, there shall be a fire-safe area, as specified in writing within the past year by a fire safety expert, on the same floor as each resident with mobility needs.

2. DESCRIPTION OF VIOLATION

Based upon interviews of staff person A, who is the administrator and staff person B it was determined that resident #1 resides on the second floor of the home which does not have an internal designated fire-safe area. The resident uses an assistive device and would require assistance to evacuate from floors above or below grade level and therefore is considered an individual with mobility needs and must reside on a floor of the home that is at grade level. The home's emergency preparedness plan also states, "If Cole Manor serves one or more residents with mobility needs above or below grade level of the Home, there shall be a fire safe area on the same floor as each resident with the mobility needs."

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

*5-16-12 See attached pages*

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

*VIDA GLOVER, ADMINISTRATOR*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page)

*Vida Glover, Administrator*

Date

*5-16-12*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of

*6-20-12*  
(Date)

Verification of Legal Entity Representative Signature

*6-20-12*  
(Date)

The above plan of correction was approved by

*[Handwritten Initials]*  
(Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

COLE MANOR

*Vida Glover, Admin. 5-16-12*  
Vida Glover, Administrator

VIOLATION 2600.123 (d)

In order to insure the safety of Cole Manor residents, Cole Manor has made the following changes:

1. New residents with any assistive device will be not be placed on Cole Manor's 2<sup>nd</sup> floor.
2. Residents with assistive devices were transferred/moved from 2<sup>nd</sup> floor to the 1st floor as follows:  
Actions taken thus far:  
Resident in Room # 9 was transferred to Room # 21 on 4/27/2012  
Resident in Room # 14 was transferred to Room # 4 on 5/1/ 2012
3. Cole Manor's Fire Safety Policy was updated to reflect the change of resident admission with assistive devices not to be admitted to the 2<sup>nd</sup> floor or above grade level. If the resident is currently living above grade level and has changes in mobility needs, the current resident will be assessed and transferred to the 1<sup>st</sup> floor. In the event that no rooms are available, the resident/family will be sent a 30 day notice that Cole Manor can no longer meet the needs of the resident.

4. On 5/8/2012, a representative from MH/MR and a representative from AAA were present at Cole Manor. Resident in Room # 17 was able to evacuate the 2<sup>nd</sup> floor in 1.5 minutes. Please see page # 2 for copies of letter from both representatives.
5. Timed individual evacuations were completed on each remaining 2<sup>nd</sup> floor Residents on 5/16/2012. It was determined that all remaining residents residing on the 2<sup>nd</sup> were able to evacuate with out assistance within the 3 minute time line as established by our most recent letter from the Coudersport Fire Chief.

*Vida Glover, Adm. 5-16-12*

Violation Report: 24263 - 04/18/2012 - Patton, Leslie

1. REGULATION 55 Pa.Code §2600

2600.132(h) - Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

2. DESCRIPTION OF VIOLATION

Staff person A, who is the administrator and staff person B indicated that the residents who reside on the second floor remain on the upstairs landing of the external fire escape and do not fully evacuate to the external designated fire-safe area away from the building during monthly fire drills.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

*5-16-12 See attached pages*

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

*Vida Glover, Administrator*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page)

*VIDA GLOVER*

Date

*5-16-12*

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The above plan of correction is approved as of 6-20-12  
(Date)

Verification of Legal Entity Representative Signature 6-20-12  
(Date)

The above plan of correction was approved by *Q*  
(Initials)

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- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented