

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to SHERRY STOCKDALE

LEGAL ENTITY

To operate BACK TO BASICS PERSONAL CARE

NAME OF FACILITY OR AGENCY

Located at 215 SLAUGHTERHOUSE ROAD, DAYTON, PA 16222

(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 8
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 May 11, 2012 until May 11, 2013,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **427180**

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

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

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: JUN 13 2012

Ms. Sherry Stockdale, Owner
178 Slaughterhouse Road
Dayton, Pennsylvania 16222

RE: Back to Basics Personal Care
215 Slaughterhouse Road
Dayton, Pennsylvania 16222

Dear Ms. Stockdale:

As a result of the Department of Public Welfare's licensing inspection on May 11, 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.

As a result of your personal care home's recent adjustment of the use of physical space, we are revising your licensed capacity.

Since this is a reduction in the previous licensed capacity, you have the right to appeal this decision through a hearing before the Bureau of Hearing and Appeals, Department of Public Welfare in accordance with 1 Pa.Code Part II, Chs. 31-35. If you decide to appeal, a written request for an appeal must be received within 10 days of the date of this letter by:

Jacob Herzing, Enforcement Manager
Adult Residential Licensing
Department of Public Welfare
631 Health and Welfare Building
Seventh and Forster Streets
Harrisburg, Pennsylvania 17120

Ms. Sherry Stockdale

2

This decision is final 11 days from the date of this letter, or if you decide to appeal, upon issuance of a decision by the Bureau of Hearings and Appeals.

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 date "1/98".

Ronald Melusky
Director

Enclosures
License
Violation Report

Violation Report: 42718 - 05/11/2012 - McConnell, Deb

1. REGULATION 65 Pa.Code §2600

2600.53(a) - The administrator shall have one of the following qualifications:

- (1) A license as a registered nurse from the Department of State.
- (2) An associate's degree or 60 credit hours from an accredited college or university.
- (3) A license as a licensed practical nurse from the Department of State and 1 year of work experience in a related field.
- (4) A license as a nursing home administrator from the Department of State.
- (5) For a home serving 8 or fewer residents, a general education development (GED) diploma or high school diploma and 2 years direct care or administrative experience in the human services field.

2. DESCRIPTION OF VIOLATION

The home is licensed for a capacity of 12. Staff person A, the home's administrator, did not complete 60 or more college credits/credited hours.

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.

due to inability to produce acceptable
 documentation; we are requesting
 a reduction for capacity back to
 8 -

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Sherry Stockdale

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

SHERRY STOCKDALE

Date

6-2-12

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

The above plan of correction is approved as of

6/2/12
(Date)

Verification of Legal Entity Representative Signature

6/2/12
(Date)

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

The above plan of correction was approved by

SM
(Initials)

Violation Report: 42718 - 05/11/2012 - McConnell, Deb

1. REGULATION 55 Pa.Code §2600

- 2600.64(a) - Prior to initial employment as an administrator, a candidate shall successfully complete the following:
- (1) An orientation program approved and administered by the Department.
 - (2) A 100-hour standardized Department-approved administrator training course.
 - (3) A Department-approved competency-based training test with a passing score.

2. DESCRIPTION OF VIOLATION

Staff person A, who is the home's administrator, has not successfully completed the orientation program approved by the Department.

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.

Orientation program completed 3/9/2006.
 Certificate Provided.
 JW
 6/7/12

RECEIVED

JUN 4 2012

Western Field Office
 Adult Residential Licensing

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Sherry Stockdale

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

SHERRY STOCKDALE

Date

5-31-12

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

The above plan of correction is approved as of

6/7/12
 (Date)

Verification of Legal Entity Representative Signature

6/7/12
 (Date)

The above plan of correction was approved by

JW
 (Initials)

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

Violation Report: 42718 - 05/11/2012 - McConnell, Deb

1. REGULATION 55 Pa.Code §2600

2600.105(g)(1) - To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.

2. DESCRIPTION OF VIOLATION

On 5/11/12, there was an accumulation of lint in the lint trap of the dryer in the kitchen.

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.

5/31/12:
 a reminder is attached to wall behind dryer to clean filter after every use. Dryer was being used at the time lint was discovered. Load of towels had just finished drying. All staff have been directed to clean lint filter after every use.

By 6/30/12 A designated staff person will check the lint trap daily to ensure there is no lint build-up
 By 6/30/12 The administrator will monitor the home at least weekly to ensure there is no lint build-up

RECEIVED

JUN 4 2012

Western Field Office
 April Residential Licensing

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page) *Sherry Stockdale*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) **SHERRY STOCKDALE** Date **5-31-12**

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

The above plan of correction is approved as of <u>6/7/12</u> (Date)	Verification of Legal Entity Representative Signature <u>6/7/12</u> (Date)
The above plan of correction was approved by <u>JMW</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>JMW</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 42718 - 05/11/2012 - McConnell, Deb

1. REGULATION 55 Pa.Code §2600

2600.124 - The home shall notify the local fire department in writing of the address of the home, location of the bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.

2. DESCRIPTION OF VIOLATION

The home has not notified the local fire department in writing of the address of the home, the location of immobile residents or the assistance needed in an evacuation.

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.

local fire department did an onsite check including escorted through home + introduced to all residents.
 The local fire department was provided address, location of bedrooms + any mobility needs.
 The documentation of all items above was not on file in entirety.
 The local fire dept has signed a document of this notification - attached

RECEIVED
 JUN 4 2012
 Western Field Office
 Adult Residential Licensing

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Shery Stockdale*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) **SHERY STOCKDALE** Date **5-31-12**

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

The above plan of correction is approved as of <u>6/1/12</u> (Date)	Verification of Legal Entity Representative Signature <u>6/1/12</u> (Date)
The above plan of correction was approved by <u>[Signature]</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 42718 - 05/11/2012 - McConnell, Deb

1. REGULATION 55 Pa.Code §2600

2600.131(f) - Fire extinguishers shall be inspected and approved annually by a fire safety expert. The date of the inspection shall be on the extinguisher.

2. DESCRIPTION OF VIOLATION

The fire extinguisher in the basement furnace room has not been inspected by a fire safety expert since 5/2010.

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.

5/31/12: replaced extinguisher with a current inspection sticker

JAWCO from Bensintowny conducts a whole house fire extinguisher inspection, and missed the one by furnace.

RECEIVED

JUN 4 2012

Western Field Office
Adult Residential Licensing

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Sherry Stockdale*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>SHERRY STOCKDALE</i>	Date <i>5-31-12</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 6/7/12 (Date)

Verification of Legal Entity Representative Signature 6/7/12 (Date)

The above plan of correction was approved by JRW (Initials)

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

Violation Report: 42718 - 05/11/2012 - McConnell, Deb

1. REGULATION 55 Pa.Code §2600

2600.132(e) - A fire drill shall be held during sleeping hours once every 6 months.

2. DESCRIPTION OF VIOLATION

The last drill conducted during sleeping hours was on 7/29/11.

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.

fire drill was conducted May 12, 2012,
with minimal⁽¹⁾ staff present at 2:00 AM,
owner + administrator were present
but did NOT participate.

By November 30, 2012

A sleeping hours fire drill, conducted with
the minimum number of staff, will
be conducted every 6 months.

6/7/12

RECEIVED

JUN 4 2012

Western Field Office
Adult Residential Licensing

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
(Required on EVERY Page) *Sherry Stockdale*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) SHERRY STOCKDALE	Date 5-31-12
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>6/7/12</u> (Date)	Verification of Legal Entity Representative Signature <u>6/7/12</u> (Date)
The above plan of correction was approved by <u><i>JM</i></u> (initials)	<input checked="" type="checkbox"/> Fully Implemented <i>SM</i> <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented