





SEP 06 2012

Ms. Mary Jo Arena-Cronin, Owner/Administrator  
Hillview Home, Inc.  
Hillview Home  
615 Cornell Street  
Coraopolis, Pennsylvania 15108

Dear Ms. Arena-Cronin:

As a result of the Department of Public Welfare's licensing inspection on June 26, 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 Human Services Licensing so that compliance can be verified.

A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

Sincerely,

A handwritten signature in black ink, appearing to read "R. Melusky", with a long horizontal stroke extending to the right.

Ronald Melusky  
Director

Enclosures  
License  
Violation Report



RECORDED

Violation Report: 43023 - 06/26/2012 - Garrigan, Laurie

1. REGULATION 55 Pa.Code §2600

2800.82(a) - Poisonous materials shall be stored in their original, labeled containers.

2. DESCRIPTION OF VIOLATION

There was an unlabeled plastic spray bottle, containing a green liquid cleaning product, on the railing in the main hallway.

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.

The plastic bottle had a concentrated deodorizer in it, a manufacturer label was put on the spray bottle to correct the violations. Administration staff are aware of this regulation & will always label any unmarked bottles with labels from manufacturer.

By 9/25/12 - All staff persons will be educated concerning the labeling and safe storage of poisonous materials and the risk to residents.

ms 8/30/12

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page)

*[Handwritten Signature]*

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

MARCY'S ACENT-CROWN-ADM

Date 8/6/12

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

The above plan of correction is approved as of 8/30/12 (Date)

Verification of Legal Entity Representative Signature 8/30/12 (Date)

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

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

Violation Report: 43023 - 06/26/2012 - Garrigan, Laurie

AUG 13 2012

1. REGULATION 55 Pa.Code §2600

2600.85(e) - Trash outside the home shall be kept in covered receptacles that prevent the penetration of insects and rodents.

2. DESCRIPTION OF VIOLATION

There were numerous bags of garbage in the uncovered dumpster in the parking lot.

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.

Dumpster company Valley Waste was called immediately to come to the facility & cover the dumpster, the lids were blocked by the wall. Administrator filed a verbal complaint with the company explaining when the dumpster is emptied the truck puts the dumpster too close to the wall, leaving the lids open making it impossible to close the lids. A letter from Valley waste was requested stating that the drivers will close the lids each time.

All staff is made aware of this violation & is to call Valley waste immediately if this happens again.

Repeat Violation: Yes

Date(s) of Previous Violation(s):

05/13/2011

Signature of Legal Entity Representative (Required on EVERY Page)

*Mary Jo Acosta-Covino*

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

Mary Jo Acosta-Covino-Admin.

Date

8/6/12

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

The above plan of correction is approved as of

8/30/12 (Date)

Verification of Legal Entity Representative Signature

8/30/12 (Date)

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

The above plan of correction was approved by

*MS* (Initials)

AUG 13 2012

Violation Report: 43023 - 08/26/2012 - Garrigan, Laurie

1. REGULATION 55 Pa.Code §2600

2600.91 - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

2. DESCRIPTION OF VIOLATION

Emergency telephone numbers were not posted by the telephone in bedroom #6.

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.

Emergency numbers for the phone in room #6 were previously taped to the personal phone, the residents family replaced [redacted] phone & new numbers were never put on the new phone. Resident, Residents family & staff were all made aware of the violation & will follow the regulation with the manager & administrator following up periodically.

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

Signature of Legal Entity Representative (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Date 8/6/12

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The above plan of correction is approved as of 8/30/12 (Date)

Verification of Legal Entity Representative Signature 8/30/12 (Date)

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

- Fully Implemented [checked] ms
Partially Implemented - Adequate Progress
Partially Implemented - Inadequate Progress
Not Implemented

Violation Report: 43023 - 08/26/2012 - Garrigan, Laurie

1. REGULATION 65 Pa.Code §2600  
2600.93(a) - Each ramp, interior stairway and outside steps must have a well-secured handrail.

2. DESCRIPTION OF VIOLATION  
There is no handrail at the approximate 5 inch step in the hallway near the office.

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.  
  
The handrail was recently removed in order to have an old door way frame removed & replaced. A new handrail will be added when the repair is complete by the end of September.  
  
Administrator is aware of this regulation & will be certain to comply.  
  
The home received a bid to have the handrail installed. ms 8/30/12

Repeat Violation: Yes      Date(s) of Previous Violation(s): 05/13/2011

Signature of Legal Entity Representative (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)      Date 8/6/12

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Verification of Legal Entity Representative Signature 8/30/12 (Date)

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

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

RECEIVED

Violation Report: 43023 - 06/26/2012 - Garrigan, Laurie

1. REGULATION 65 Pa.Code §2600

2600.94(b) - Interior stairs, exterior steps and ramps must have nonskid surfaces.

2. DESCRIPTION OF VIOLATION

The nonskid strips have peeled off all but 4 steps at the fire escape leading to the second floor.

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.

*Nonskid strips did peel off of the 4 steps  
All of the strips will be removed & nonskid  
paint will be applied once repairs on  
the deck are complete by the end of September*

*Administrators & staff are aware of this regulation  
& will check all steps & ramps as part of  
the Quality management plan.*

*nonskid paint has been applied to steps cited and the home received a  
bid to have a second coat applied. MS 8/30/12*

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

*[Handwritten Signature]*

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

*Wendy Green-Carroll - Admin*

Date

*8/6/12*

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

The above plan of correction is approved as of

*8/30/12*  
(Date)

Verification of Legal Entity Representative Signature

*8/30/12*  
(Date)

The above plan of correction was approved by

*MS*  
(Initials)

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

Violation Report: 43023 - 08/26/2012 - Garrigan, Laurie

**1. REGULATION 65 Pa.Code §2600**

Western Field Office  
Adult Residential Licensing

2600.100(e) - The exterior of the building and the building grounds or yard must be in good repair and free of hazards.

**2. DESCRIPTION OF VIOLATION**

The entire railing is splintered on the steps of the fire escape leading to the second floor, posing a safety hazard.  
There is an approximate 13 inch drop from the backyard walkway to the ground, posing a safety hazard.

**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.

*Outside deck was recently power washed causing the wood to lift, the next step to the deck repair is sanding & staining, by the end of September all repairs will be complete.*

*Administrative is aware of this regulation & will review as part of the Quality management plan.*

*8/23/12 - Waiting for bids for repair or replacement of railing.*

*Products have been purchased to restore the splintered railing. MS 8/30/12*

Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page)			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)			Date

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The above plan of correction was approved by	<u>MS</u> (Initials)	<input type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input checked="" type="checkbox"/> Partially Implemented - Inadequate Progress MS <input type="checkbox"/> Not Implemented	

RECEIVED

Violation Report: 43023 - 06/26/2012 - Garigan, Laurie

1. REGULATION 55 Pa. Code §2600.

2600.101(f)(2) - Window coverings must be clean, in good repair, provide privacy and cover the entire window when drawn.

2. DESCRIPTION OF VIOLATION

Valances, which do not provide privacy, are the only window coverings in bedroom #2.

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.

Window coverings will be replaced on this 3rd floor bedroom to ensure the entire window is covered. This will be complete by the end of September. Administration will check all windows to ensure privacy for residents.

8/23/12 - will have the windows covered with blinds or curtains by mid September, have called Home Depot Discount Blinds company for bids. Home Depot has measured the windows for blinds. 8/30/12

Repeat Violation: No	Date(s) of Previous Violation(s):
Signature of Legal Entity Representative (Required on EVERY Page)	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date

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

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The above plan of correction was approved by <u>MS</u> (Initials)	<input type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input checked="" type="checkbox"/> Partially Implemented - Inadequate Progress MS <input type="checkbox"/> Not Implemented

Violation Report: 43023 - 06/26/2012 - Garrigan, Laurie

1. REGULATION 55 Pa.Code §2600

2600.103(e) - Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

2. DESCRIPTION OF VIOLATION

The following undated and unlabeled foods were located in the garage refrigerator:

- \* Bowl of egg salad
- \* Hoagie

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.

Staff inservice was held July 18<sup>th</sup> in which all staff was reminded of this regulation as well as review of Food Safety. Residents that have access to the refrigerators were also involved in the education.

Kitchen staff will monitor this regulation & be sure to comply.

Record of training with staff signatures attached.

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

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

MACTO ALLEN - CLONIA Date 8/6/12

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

The above plan of correction is approved as of 8/30/12  
(Date)

Verification of Legal Entity Representative Signature 8/30/12  
(Date)

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

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

Violation Report: 43023 - 08/26/2012 - Garrigan, Laurie

1. REGULATION 55 Pa.Code §2600

2800.123(c) - For a home serving nine or more residents, an emergency evacuation diagram of each floor showing corridors, line of travel to exit doors and location of the fire extinguishers and pull signals shall be posted in a conspicuous and public place on each floor.

2. DESCRIPTION OF VIOLATION

The location of the fire extinguishers and pull stations was not indicated on the emergency evacuation diagram on the door leading to the basement.

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.

All evacuation diagrams were correct but this one, it was modified on June 27th, copy attached. Administrator & manager will be sure to review the diagrams yearly.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page)

*[Handwritten Signature]*

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

MARY SO HELEN CROWER

Date 8/6/12

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

The above plan of correction is approved as of

5/30/12 (Date)

Verification of Legal Entity Representative Signature

8/30/12 (Date)

The above plan of correction was approved by

MS (Initials)

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

RECEIVED

Violation Report: 43023 - 08/26/2012 - Garrigan, Laurie

AUG 13 2012

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.

Western Field Office  
Adult Residential Licensing

2. DESCRIPTION OF VIOLATION

The fire extinguisher in the laundry room did not have a tag indicating it had been inspected.

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.

Administrator is aware of this regulation & is under contract with Advanced Fire Co to inspect, re-fill or re-place all fire extinguishers. All other extinguishers have current tags but the one in the laundry room.

Advanced was called to replace tag which was done on July 10<sup>th</sup> at that time all others were inspected.

Administrator will maintain contract with Advanced for annual inspections.

Copy of bill enclosed

Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page)			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)			Date

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

The above plan of correction is approved as of 8/30/12  
(Date)

Verification of Legal Entity Representative Signature MS  
(Date)

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

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

RECEIVED

Violation Report: 43023 - 06/26/2012 - Garrigan, Laurie AUG 13 2012

1. REGULATION 55 Pa.Code §2600  
2600.132(f) - Alternate exit routes shall be used during fire drills. Western Field Office  
Adult Residential Licensing

2. DESCRIPTION OF VIOLATION  
The home's fire drill record indicates "all" exit routes were used for the following fire drills:  
\* 12/11/11 at 11:00 AM  
\* 01/11/12 at 08:15 AM  
\* 03/09/12 at 02:20 PM  
\* 04/20/12 at 11:15 AM  
\* 05/21/12 at 07:20 PM

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.  
*Two fire drills have been conducted since inspection & alternate exit doors were used without any problems.  
Future drills will not have "All" as exit routes  
Copy of drills enclosed*

Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page)			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)			Date

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

The above plan of correction is approved as of <u>8/30/12</u> (Date)	Verification of Legal Entity Representative Signature <u>8/30/12</u> (Date)
The above plan of correction was approved by <u>WS</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented WS <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

# RECEIVED

Violation Report: 43023 - 06/26/2012 - Garrigan, Laurie

AUG 13 2012

**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.   
 Western Field Office  
 Adult Residential Licensing

**2. DESCRIPTION OF VIOLATION**

Residents evacuate to the back porch for fire drills; however, this is not the designated meeting place.

**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.

Two fire drills have been run since this inspection & as a result the designated meeting place has been changed temporarily staff & residents informed verbally.

Administrator will review & get professional advice from the local fire chief before changing the meeting place permanently. Fire chief not available until mid September at which time this will be completed. current staff and residents have been educated regarding the designated meeting place for fire evacuation and the importance of assembly there during fire drills. The administrator will monitor monthly fire drills to ensure residents evacuate to the designated meeting place. MS/30/12

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

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

Laurie Garrigan

Date

8/6/12

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

The above plan of correction is approved as of 8/30/12  
(Date)

Verification of Legal Entity Representative Signature 8/30/12  
(Date)

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

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

RECEIVED

Violation Report: 43023 - 06/26/2012 - Garrigan, Laurie

AUG 13 2012

1. REGULATION 55 Pa.Code §2600

2600.141(b)(1) - A resident shall have a medical evaluation at least annually.

Western Field Office  
Adult Residential Licensing

2. DESCRIPTION OF VIOLATION

Resident #1 has a medical evaluation, dated 12/14/10. There is another undated medical evaluation in the resident's record. Since it is not dated, it is not able to be determined if the medical evaluation was completed within the required time frame.

Resident #2's current medical evaluation is dated 4/26/12. This resident's previous medical evaluation is dated 3/25/11.

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.

*Administrator & Manager are aware of this regulation & will ensure the doctor completes all medical evals correctly & timely.*

*By 9/25/12 - A resident document tracking system will be developed and implemented to ensure all residents have a medical evaluation completed within the required timeframe.*

*MS 8/30/12*

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

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

Date

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8/30/12  
(Date)

Verification of Legal Entity Representative Signature

8/30/12  
(Date)

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

The above plan of correction was approved by

MS  
(Initials)

Violation Report: 43023 - 06/26/2012 - Garigan, Laurie AUG 13 2012

1. REGULATION 55 Pa.Code §2600

Western Field Office  
Adult Residential Licensing

2600.225(a) - A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

2. DESCRIPTION OF VIOLATION

Resident #3's assessment, dated 11/20/11, does not include a mechanical soft diet as ordered on the medical evaluation, dated 11/11/11.

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.

Resident #3 came to our facility with a medical eval from the SNF stating [redacted] was on a mechanical soft diet while in their care. The diet was changed to a regular diet once discharged from their facility but the eval didn't reflect the change, the resident [redacted] said [redacted] was not on a soft diet.

A script for a regular diet enclosed.

Administrators & manager will review medical eval's more closely upon admission & changes that are to be made will be done within the 15 day period.

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

Signature of Legal Entity Representative (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Mary Jo Green-Cantor* Date *8/6/12*

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

The above plan of correction is approved as of 5/30/12 (Date)

Verification of Legal Entity Representative Signature 8/30/12 (Date)

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

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

RECEIVED

Violation Report: 43023 - 06/26/2012 - Garrigan, Laurie

AUG 13 2012

1. REGULATION 65 Pa.Code §2600

2600.252 - Each resident's record must include the following information: (1) through (3) Western Field Office Adult Residential Licensing

2. DESCRIPTION OF VIOLATION

The current photograph for resident #2 is dated 3/2/10.

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.

Resident #2 had an outdated picture  
A new picture was taken & added to her record.

Administrative reviewed all residents photos  
to be sure of 2600.252 compliance.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

*[Handwritten Signature]*

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

*Marys Anne Cerin*

Date

*8/8/12*

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

The above plan of correction is approved as of 8/13/12  
(Date)

Verification of Legal Entity Representative Signature 8/30/12  
(Date)

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

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