

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to COUNTRY MEADOWS ASSOCIATES

To operate COUNTRY MEADOWS OF LEADER HEIGHTS

Located at 2760 PINE GROVE ROAD, YORK, PA 17403

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

To provide Personal Care Homes

The total number of persons which may be cared for at one time may not exceed 215  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions: Secure Dementia Care Unit - 55 Pa. Code §§ 2600.231-239 - Capacity 48

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

and shall remain in effect from September 1, 2012 until September 1, 2013,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 350800

*Robert E. Robinson*

ISSUING OFFICER

*[Signature]*

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



SEP 18 2012

Mr. David C. Leader, Chief Operating Officer  
Country Meadows Associates  
830 Cherry Drive  
Hershey, Pennsylvania 17033

RE: Country Meadows of Leader Heights  
2760 Pine Grove Road  
York, Pennsylvania 17403

Dear Mr. Leader:

As a result of the Department of Public Welfare's licensing inspection on July 31, 2012 and August 1, 2012, and the corrections you have made after our inspection, we have found the above personal care home to be in compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes). Therefore, a regular license is being issued. Your license is enclosed.


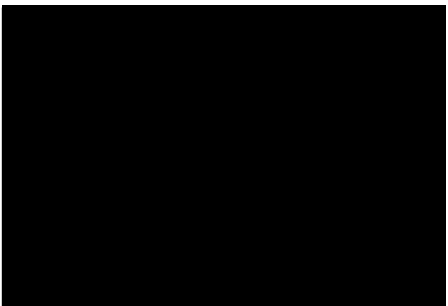
Sincerely,

A handwritten signature in black ink, appearing to be "R. Melusky", with a horizontal line extending to the right.

Ronald Melusky  
Director

Enclosures  
License  
Violation Report

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

PCH Name: COUNTRY MEADOWS OF LEADER HEIGHTS		License Number: 350800
Address: 2760 PINE GROVE ROAD, YORK, PA 17403		County: York
Administrator: Kevin Cysyk		Region: CENTRAL
Legal Entity Name: COUNTRY MEADOWS ASSOCIATES		
Legal Entity Address: 830 CHERRY DRIVE, HERSHEY, PA 17033		
Certificate(s) of Occupancy		
C-2 LP 02/17/2003 L&I	I-2 04/28/2011 York Township	
Staffing Hours		
Resident Support: 0	Total Daily Staff: 184	Waking Staff: 138
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 07/31/2012: Hoover, Douglas, Emick, Gloria, Gensil, Lori, Rosenblat, Dale 08/01/2012: Hoover, Douglas, Emick, Gloria, Gensil, Lori, Rosenblat, Dale		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 215 Number of Residents Served: 136 Secured Dementia Care Unit in Home: Yes Area: NA Secured Dementia Unit Capacity, if Applicable: 48	Number of Residents who:	
		
PCH Division Central Region Field Office		

SEP 12 2012

RECEIVED

Violation Report: 35080 - 07/31/2012 - Hoover, Douglas

**1. REGULATION 55 Pa.Code §2600**

2600.121(a) - Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

**2. DESCRIPTION OF VIOLATION**

The exit from the stairwell, identified by an exit sign, that opens into the secured dementia care courtyard is obstructed by a key-operated magnetic lock that opens an exterior gate. This gate provides egress away from the courtyard and the building, however, there is no key or keypad to unlock the gate. The courtyard has not been designated as a fire-safe area by a fire safety expert and it is accessible to all residents in the facility.

**3. PLAN OF CORRECTION (POC) (Attach pages as necessary. 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.*

On August 7, 2012, a letter was submitted to DPW including plans for our changes to the secured dementia care courtyard. The courtyard is in the process of being replaced with a very large deck with specially designed walls to ensure our residents are safe and have a wonderful space for outdoor activities. The fence and gate have been removed. All exit doors will open in the event of a fire.

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) Michelle Hamilton, Sr. VP and Chief of Operations

Date September 7, 2012

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

The above plan of correction is approved as of 9-12-12  
(Date)

Signature of Legal Entity Representative 9-12-12  
(Date)

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

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

Violation Report: 35080 - 07/31/2012 - Hoover, Douglas

**1. REGULATION 55 Pa.Code §2600**

2600.233(c) - If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

**2. DESCRIPTION OF VIOLATION**

The secured dementia care unit, "Connections," does not have the directions for operating the electronic card scanner posted at each entry/exit door. Staff must be contacted to open the doors which prevents immediate egress.

**3. PLAN OF CORRECTION (POC) (Attach pages as necessary. 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.*

At the time of inspection, a process was implemented to correct this process. Electronic cards are available for visitors / family members from the receptionist as they sign in for a visit and receive a visitor tag. Signs were posted at each door indicating that swipe cards are available at front desk. This process allows visitors / family members immediate egress.

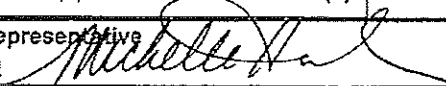
Ongoing the executive director or designee will monitor to ensure compliance.

All doors will automatically open in the event of a fire.

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) Michelle Hamilton, Sr. VP and Chief of Operations

Date September 7, 2012

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(Date)

Signature of Legal Entity Representative 9-12-12  
(Date)

The above plan of correction was approved by ME  
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- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 35080 - 07/31/2012 - Hoover, Douglas

**1. REGULATION 55 Pa.Code §2600**

2600.239(a) - The legal entity shall submit a written request to the Department's personal care home regional office at least 60 days prior to the following:

- (1) Opening a secured care dementia unit.
- (2) Adding a secured dementia care unit to an existing home.
- (3) Increasing the maximum capacity in an existing unit.
- (4) Changing the locking system, exit doors or floor plan of an existing unit.

**2. DESCRIPTION OF VIOLATION**

The facility recently changed their magnetic locking systems for the secured dementia care unit, "Connections." Keypad devices for unlocking the doors were replaced by card scanners. The facility did not notify the Department of the change.


**3. PLAN OF CORRECTION (POC) (Attach pages as necessary. 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.*

Electronic card scanners replaced the keypad devices earlier in 2012. Attached is a letter notifying DPW of the recent change in the magnetic locking system in the secured dementia unit.

Ongoing, executive director / designee will notify DPW of any changes at the facility to ensure compliance.

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) Michelle Hamilton, Sr. VP and Chief of Operations Date September 7, 2012

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

The above plan of correction is approved as of 9-12-12 (Date)

Signature of Legal Entity Representative 9-12-12 (Date)

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

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