

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to LAFAYETTE MANOR INC LMI
LEGAL ENTITY

To operate BEECHWOOD COURT AT LAFAYETTE MANOR
NAME OF FACILITY OR AGENCY

Located at 145 LAFAYETTE MANOR ROAD, UNIONTOWN, PA 15401
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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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 64
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.
(MAXIMUM CAPACITY)

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 23

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 January 1, 2013 until January 1, 2014,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 409610

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.



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

JAN 04 2013

Ms. Cynthia S. Trimmer, Administrator
Lafayette Manor, Inc. LMI
Beechwood Court at Lafayette Manor
15 Lafayette Manor Road
Uniontown, Pennsylvania 15401

Dear Ms. Trimmer:

As a result of the Department of Public Welfare's (Department) licensing inspection on October 16, 2012 October 17, 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 read "R. Melusky", written over a horizontal line.

Ronald Melusky
Director

Enclosures
License
Violation Report

RECEIVED

DEC 11 2012

Violation Report: 40961 - 10/16/2012 - Cutter, Jan
PCH Name: BEECHWOOD COURT AT LAFAYETTE MANOR

VERMONT DEPARTMENT OF
HUMAN SERVICES LICENSING

1. REGULATION 55 Pa.Code §2600

2600.231(b) - A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner, documented on a form provided by the Department, within 60 days prior to admission. Documentation shall include the resident's diagnosis of Alzheimer's disease or other dementia and the need for the resident to be served in a secured dementia care unit.

2a. DESCRIPTION OF VIOLATION

Resident #1, admitted to the Secure Dementia Care Unit on 8/31/2012; and Resident #2, admitted to the Secure Dementia Care Unit on 8/9/2012 had medical evaluations that did not document the residents' need for the Secure Dementia Care Unit.

Resident #3, admitted to the Secure Dementia Care Unit on 1/11/2012, had an annual medical evaluation, dated 8/13/2012, that did not document the continued need for the Secure Dementia Care Unit.

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 L.P.N on duty the day of the inspection contacted both physicians involved and received a verbal order to check the appropriate Box on the DME Form

Further investigation found that the error seemed to be related to the New Forms. The RN responsible for assisting the physician in completing the Form did not realize the 3rd box was to be checked. The RN and all Staff participating in the the DME process have been made aware of the New Form and the requirement to check the box in addition to completing the cognitive screen. All Sec D Records have been reviewed and all are now in Compliance.

Three DME attached

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Cynthia S. Trimmer

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

Cynthia S. Trimmer, Administrator

Date

12-11-12

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

The above plan of correction is approved as of

12-18-12
(Date)

Plan of correction implementation status as of

12-18-12
(Date)

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

The above plan of correction was approved by

[Signature]
(Initials)

RECEIVED

Violation Report: 40961 - 10/16/2012 - Cutler, Jan PCH Name: BEECHWOOD COURT AT LAFAYETTE MANOR		DEC 11 2012
1. REGULATION 55 Pa.Code §2600 2600.233(a) - Doors equipped with key-locking devices, electronic card operated systems or other devices that prevent immediate egress are permitted only if there is written approval from the Department of Labor and Industry, Department of Health or appropriate local building authority permitting the use of the specific locking system.		
2a. DESCRIPTION OF VIOLATION The secure dementia care unit courtyard has a gate with a key lock which prevents immediate egress of residents from the building. The home does not have written approval from the Department of Labor and Industry, Department of Health or local building authority for the use of this lock.		
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.		
<p>I discussed this violation with Matt Jones. He recommended contacting the local Building Code Enforcement Officer. Further investigation found that K2 Engineering Inc is the agency responsible for the Building Code enforcement. [Redacted] from K2 engineering inspected the area on 10-5-12. He advised that the pad lock is allowable. He asked where the key was kept. I told him our policy is to keep the key hanging in SDU office easily accessible to all staff. He said he would review the issue with his supervisor and get an excuse to me in writing as soon as possible. I received his letter by fax on 12-10-12.</p> <p>I discussed this process with [Redacted] & she approved on 12-14-12 to present the violation report letter from K2 Engineering and key policy attached.</p>		
Repeat Violation: No	Date(s) of Previous Violation(s):	
Signature of Legal Entity Representative (Required on EVERY Page) <i>Cynthia S. Trimmer</i>		
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Cynthia S. Trimmer</i>		Date 12-11-12
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!		
The above plan of correction is approved as of <u>12-18-12</u> (Date)	Plan of correction implementation status as of <u>12-18-12</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	