

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to STANDISH S ASSISTED LIVING INC  
LEGAL ENTITY

To operate STANDISH'S  
NAME OF FACILITY OR AGENCY

Located at 158 CHESTNUT RIDGE ROAD, WASHINGTON, PA 15301  
(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 6  
(MAXIMUM CAPACITY)  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

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 January 27, 2013 until January 27, 2014,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 406300

*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.

PW 628 - 01/11



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

DEC 06 2012

Ms. JoAnn Standish, Administrator  
Standish's Assisted Living, Inc.  
Standish's  
158 Chestnut Ridge Road  
Washington, Pennsylvania 15301

Dear Ms. Standish:

As a result of the Department of Public Welfare's (Department) licensing inspection on October 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 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 "Ronald Melusky", with a long horizontal stroke extending to the right.

Ronald Melusky  
Director

Enclosures  
License  
Violation Report



RECEIVED

Violation Report: 40630 - 10/18/2012 - Goedert, Caroline  
 PCH Name: STANDISH S

NOV 8 2012

1. REGULATION 55 Pa.Code §2600

2600.101(j)(7) - Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on at bedside.

Western Field Office

Adult Residential Licensing

2a. DESCRIPTION OF VIOLATION

Resident #4 does not have a source of light that can be turned on/off from bedside.

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.

- 1) Change made → I installed a permanent light on the wall. It was mounted so that [redacted] can turn it on + off while in bed (the light in [redacted] room was moved because [redacted] broke 3 other lamps getting in + out of bed with [redacted] wheelchair)
2. who → [redacted] administrator already installed
- 3 - when → was done on NOV 1, 2012.
4. Also, an <sup>additional</sup> wall mounted light was installed in Rm #1 to be more convenient with the wheelchair and to have more table space on bedside table.
5. All staff was informed and instructed as to use and purposes of change.

Thank you,

12-15-12 All bedrooms will be inspected 1x per month by the administrator to ensure all residents have an operable bedside light. JSP 11-9-12

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

Signature of Legal Entity Representative (Required on EVERY Page)      JoAnn Standish      Nov 6, 2012

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)      JoAnn Standish, administrator      Date Nov 6, 2012

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

The above plan of correction is approved as of <u>11-9-12</u> (Date)	Plan of correction implementation status as of <u>11-9-12</u> (Date)
The above plan of correction was approved by <u>JSP</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented