

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to HOTEL LEBANON CORPORATION  
LEGAL ENTITY

To operate AMERICAN HOUSE T/A HOTEL LEBANON  
NAME OF FACILITY OR AGENCY

Located at 23-25 SOUTH NINTH STREET, LEBANON, PA 17042  
(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 74  
(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 29, 2013 until January 29, 2014,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 344040

*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

**JAN 23 2013**

Ms. Melissa R. Young, Vice President/Administrator  
Hotel Lebanon Corporation  
American Hotel T/A Hotel Lebanon  
23-25 South Ninth Street  
Lebanon, Pennsylvania 17042

Dear Ms. Young:

As a result of the Department of Public Welfare's (Department) licensing inspection on November 13, 2012 and November 14, 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.

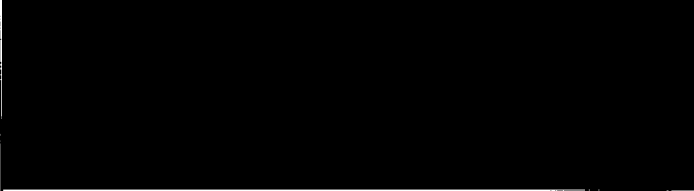
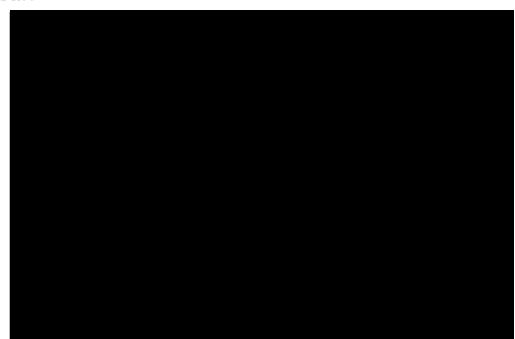
Sincerely,

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

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

PCH Name: AMERICAN HOUSE T A HOTEL LEBANON		License Number: 344040
Address: 23 25 SOUTH NINTH STREET, LEBANON, PA 17042		County: Lebanon
Administrator: Melissa Young		Region: CENTRAL
Legal Entity Name: HOTEL LEBANON CORPORATION		
Legal Entity Address: 23-25 SOUTH NINTH STREET, LEBANON, PA 17042		
Certificate(s) of Occupancy A3, C2 05/15/1987 L & I		
Staffing Hours	Total Daily Staff: 71	Waking Staff: 53
Resident Support: 0		
Type of Inspection: Ind - 49 Indicators	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal, Indicator		
On-Site Inspections Dates and Department Representatives On-Site 11/13/2012: Chou, Serena; Gensil, Lori 11/14/2012: Chou, Serena; Hoover, Douglas		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details Partial or Full Triggers: 54a, 132b      Random Indicators: 42u, 98b-1, 163c, 171b-2, 190b		
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 74 Number of Residents Served: 71 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: 	Number of Residents who: 	

**CEIVED**

DEC 11 2012

Violation Report: 34404 - 11/13/2012 - Chou, Serena  
 PCH Name: AMERICAN HOUSE T A HOTEL LEBANON

**1. REGULATION 55 Pa.Code §2600**

2600.3(c) - The personal care home shall post the current license, a copy of the current licensing inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

**2. DESCRIPTION OF VIOLATION**

On 11/14/2012, the home's current violation report was not posted in a conspicuous and public place in the home.

**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 current violation report was put in a binder that is titled American House Personal Care Home-Violation report. This was done on 11/15/2012 and it is located in the dining room. It is accessible for all to view. Please see the attachment included.

We will continue to place all future reports in this binder and remove previous ones after verification is completed. This will be the responsibility of administration and will be done after every inspection.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Melissa Young Co-administrator</i>	Date <i>12/05/2012</i>
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of 12-20-12  
 (Date)

Verification of Legal Entity Representative Signature 12-20-12  
 (Date)

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

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

Violation Report: 34404 - 11/13/2012 - Chou, Serena  
 PCH Name: AMERICAN HOUSE T A HOTEL LEBANON

**1. REGULATION 55 Pa.Code §2600**

2600.17 - Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

**2. DESCRIPTION OF VIOLATION**

On 11/14/2012 at 11:30 am, empty medication packages for Residents #5, #6 and #7 were found in a clear plastic trash bag. The residents' health information was able to be viewed through the bag.

Physicians' appointments with information including residents' names and types of appointments, dated from 11/14/2012 through 11/16/2012, were found posted on the bulletin board by the dining room entrance.

**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.

Part one of violation:

Empty medication packages for Residents #5, #6 and #7 were discarded in a proper manner on 11/14/2012 after violation occurred. Labels were removed from packaging, blacked out with permanent marker and cut up with scissors so that they are not identifiable.

All med-trained staff were instructed verbally at a staff meeting on 12/04/2012 on the proper way to discard any medication packages for all residents to protect their information. Please see signed documentation. Trash cans in the medication area will be checked on a daily basis to ensure that the proper methods are followed. Administration and med-trained staff will be responsible for this task.

Part two of violation:

Staff person who is mainly responsible for scheduling appointments was told to change the information posted on the bulletin board regarding appointments to protect resident information. This was done on 11/14/12. Please see attached document.

The appointment list will be viewed on a daily basis by administration to ensure that the procedure is being followed.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Melissa Young Co-administrator* Date *12/05/2012*

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- Not Implemented

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

Violation Report: 34404 - 11/13/2012 - Chou, Serena  
 PCH Name: AMERICAN HOUSE T A HOTEL LEBANON

**1. REGULATION 55 Pa.Code §2600**

2600.54(a) - Direct care staff persons shall have the following qualifications:

- (1) Be 18 years of age or older, except as permitted in § 2600.54(b).
- (2) Have a high school diploma, GED diploma, or active registry status on the Pennsylvania nurse aide registry.
- (3) Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary personal care services with reasonable skill and safety.

**2. DESCRIPTION OF VIOLATION**

~~Direct care staff person A does not have a high school diploma.~~ *Withdrawn - SE*

Direct care staff person C does not have an active registration status on the Pennsylvania nurse aide registry.

**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.

~~Direct care staff person A - The hire date was 09/2012. Since 10/16/2012 she has not been doing any direct care and has been working as ancillary staff in the capacity of housekeeping and cooking. Please see attached schedules.~~

Direct care staff person C was hired on 04/20/2012 with an active CNA card with an expiration date of 08/21/2012. Administration was not aware that she had not taken the necessary steps to renew her CNA status. We are assisting her to obtain a copy of her GED transcript as well as her CNA renewal card. Please see attached forms.

Administration has made the decision that we will not hire anyone who is currently trying to obtain their GED until such time that the test would be passed and they would have the actual document from the PA Department of Education. At the current time we keep a list of staff with names and dates showing when CPR and First Aid expires so that renewals are done in a timely fashion. We will add any CNA to that list and it will be checked on a monthly basis and reminders will be given but it is ultimately the responsibility of the staff person to take the necessary steps to renew and remain in our employ.

*Staff Person C's official transcript of the GED was received by the home and forwarded to the Department on 12/10/12. - SE*

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Melissa Young 12.5.12*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Melissa Young Co-administrator</i>	Date <i>12/05/2012</i>
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Violation Report: 34404 - 11/13/2012 - Chou, Serena  
 PCH Name: AMERICAN HOUSE T A HOTEL LEBANON

**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.

**2. DESCRIPTION OF VIOLATION**

The bed in Room #207 on the right side 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.

An operable lamp was placed on the bedside table in room 207 on 11/14/2012 after the inspection was concluded.

Maintenance person does a monthly check of all resident rooms using a checklist of requirements. He replaces and repairs as needed. We have now asked the housekeeper to do a weekly check as he cleans each room on a weekly basis and let maintenance person know on a daily basis any repairs or replacements needed. Administration will monitor to ensure that this method is working. Please see attached checklist.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)

*Melina Ryoney*

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

Melissa Young Co-administrator

Date 12/05/2012

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 (Date)

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 (Initials)

- Fully Implemented
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- Not Implemented

Violation Report: 34404 - 11/13/2012 - Chou, Serena  
 PCH Name: AMERICAN HOUSE T A HOTEL LEBANON

**1. REGULATION 55 Pa.Code §2600**

2600.132(b) - A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.

**2. DESCRIPTION OF VIOLATION**

The last fire drill observed by a fire safety expert was conducted on 10/17/2011.

**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 city fire department was contacted and observed a fire drill on 11/20/2012 at 10:00 am. We are awaiting the required documentation from the city to submit the form to your office. Upon receipt of the document, it will be forwarded to your office.

It will be the responsibility of administration to contact the Lebanon City Fire Commissioner to schedule required yearly fire drill one month prior to the due date. A reminder calendar will be viewed at least monthly to ensure that we do not go beyond the date of prior yearly fire drill.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Melissa Young* 12.5.12

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Melissa Young Co-administrator</i>	Date <i>12/05/2012</i>
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Violation Report: 34404 - 11/13/2012 - Chou, Serena  
 PCH Name: AMERICAN HOUSE T A HOTEL LEBANON

**1. REGULATION 55 Pa.Code §2600**

2600.144(c)(1) - Proper safeguards inside and outside of the home to prevent fire hazards involved in smoking, including providing fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the home, extinguishing procedures, fire resistant furniture both inside and outside the home and fire extinguishers in the smoking rooms.

**2. DESCRIPTION OF VIOLATION**

The home's designated smoking area on the left side of the building contained innumerable cigarette butts on the ground and in the rear 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.

The cigarette butts have been cleaned from the side of the building as well as the parking lot. It started to be cleaned on 11/14/2012 and will be continued as needed.

Administration have met with residents in groups as well as individually to explain this specific violation and the importance of smoking only in designated areas. It was also explained to staff on 12/04/2012 during a staff meeting. The staff will be active in observing, reminding residents that they must use smoke receptacles and the actual keeping the areas clean of cigarette butts. This will be an ongoing process.

Repeat Violation: No	Date(s) of Previous Violation(s):
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Signature of Legal Entity Representative (Required on EVERY Page) *Melissa Young 12.5.12*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Melissa Young Co-administrator* Date *12/05/2012*

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The above plan of correction is approved as of 12-20-12 (Date)

Verification of Legal Entity Representative Signature 12-2-12 (Date)

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

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

Violation Report: 34404 - 11/13/2012 - Chou, Serena  
 PCH Name: AMERICAN HOUSE T A HOTEL LEBANON

**1. REGULATION 55 Pa.Code §2600.**

2600.181(d) - If the resident does not need assistance with medication, medication may be stored in a resident's room for self-administration. Medications stored in the resident's room shall be kept locked in a safe and secure location to protect against contamination, spillage and theft.

**2. DESCRIPTION OF VIOLATION**

Resident #7 self administers medications and stores medications in a shared bedroom. The resident does not have any locking device in the bedroom to secure the medication.

**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 #7 self administers an ointment to [redacted] skin and lives in a shared room. The ointment was removed from [redacted] room during the inspection.

Medication staff has been instructed to keep all self treatment medications in the medication room. Medication staff has all been instructed on the new procedure for self treatments and a copy is located inside the front cover of each MAR book.

Following the new procedure ensures compliance immediately. Please see attached documents.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)

*Melissa Young 12.5.12*

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

Melissa Young Co-administrator

Date 12/05/2012

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Violation Report: 34404 - 11/13/2012 - Chou, Serena  
 PCH Name: AMERICAN HOUSE T A HOTEL LEBANON

**1. REGULATION 55 Pa.Code §2600**

2600.183(d) - Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home

**2. DESCRIPTION OF VIOLATION**

On 11/14/2012, Polyethylene Glycol, prescribed for individual #4 (who is not a current resident of the home) was located in the home's medication cart.

**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.

Polyethylene Glycol, prescribed for resident #4 (who no longer resides in the home) was removed from the medication cart during inspection. It was returned to the pharmacy for disposal.

The American House has a policy in place on medications. This policy has been reviewed by the administration and medication supervisor.

Reeducation of all medication staff on the American House policies on medications for a discharged resident is ongoing and inclusive of one-on-one and on the spot trainings. Upon discharge from the home, the medication supervisor is responsible for following the policy on discharged resident.

As of 12/10/2012, a new pharmacy company will be providing medication to the American House. In addition to delivering the medications, they will be loading and unloading our medication carts on a biweekly basis. This allows for another check for any medications inadvertently left in cart for a discharged resident.

Please see attached policy.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Melissa Young Co-administrator* Date *12/05/2012*

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Violation Report: 34404 - 11/13/2012 - Chou, Serena  
 PCH Name: AMERICAN HOUSE T A HOTEL LEBANON

**1. REGULATION 55 Pa.Code §2600**

2600.183(e) - Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

**2. DESCRIPTION OF VIOLATION**

On 11/14/2012, Resident #1's Humalog Kwikpen, was found to have been opened on 11/10/2012 and stored in the refrigerator. The medication instructions read, "do not refrigerate pens that are currently in use."

On 11/14/2012, Resident #2's Lantus Solostar was found to have been opened on 11/13/2012, and stored in the refrigerator. The medication instructions read, "open (in-use) Solostar pens should not be refrigerated."

One white, round pill was found in medication cart #1's "morning medications" drawer.

One orange, round pill was found on medication room floor near the door under a chair.

One white, round pill was found in medication cart #2's bottom drawer.

**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 #1 Humalog Kwikpen and Residents #2 Lantus Solostar pen were removed from the refrigerator and placed in top drawer of medication cart on the day of the inspection.

All medication staff has been reeducated on the proper storage of insulin pens. The insulin's informational packet for usage will be kept with the original packaging for reference.

Medication supervisor will be monitoring compliance with storage of insulin pens on a daily basis.

The American House will be starting with new medication packaging on 12/10/2012. We feel that the new packaging will eliminate pills from dislodging erroneously. Medication supervisor and two pharmacy techs will be unloading and reloading carts biweekly. This will allow for observation of any unorganized conditions. Presently we utilize blister packs that sometimes fall apart. The new system is called pack-med and no glue is involved in the packaging process.

Please see attached.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) Melissa Young 12-5-12

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Melissa Young Co-administrator Date 12/05/2012

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Violation Report: 34404 - 11/13/2012 - Chou, Serena  
 PCH Name: AMERICAN HOUSE T A HOTEL LEBANON

**1. REGULATION 55 Pa.Code §2600**

2600.187(a) - A medication record shall be kept to include the following for each resident for whom medications are administered:

- (1) Resident's name.
- (2) Drug allergies.
- (3) Name of medication.
- (4) Strength.
- (5) Dosage form.
- (6) Dose.
- (7) Route of administration.
- (8) Frequency of administration.
- (9) Administration times.
- (10) Duration of therapy, if applicable.
- (11) Special precautions, if applicable.
- (12) Diagnosis or purpose for the medication, including pro re nata (PRN).
- (13) Date and time of medication administration.
- (14) Name and initials of the staff person administering the medication.

**2. DESCRIPTION OF VIOLATION**

The medication administration record for Resident #2 does not include a diagnosis or purpose for Methocarbamol.

**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 MAR for Resident #2 was corrected in include the purpose for Methocarbamol.

A policy on medication's record is in place. Medication staff is trained on what information needs to be recorded on a MAR. MAR's are provided by the pharmacy on a monthly basis and are then individually reviewed by the medication supervisor for her to hand write any missing information.

Since 12/02/2012, a new pharmacy has begun creating the MAR's for the American House. The new MAR's have the diagnosis and purpose for each medication already printed on them. On 12/10/2012, medications will be supplied by the new pharmacy and biweekly the MAR's will be reviewed by two pharmacy techs and the medication supervisor for accuracy of the medication record.

All medication staff have been re-educated by the medication trainer on information needed to be recorded on the Medication Record.  
 Please see 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)	Date
Melissa Young Co-administrator	12/05/2012

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Violation Report: 34404 - 11/13/2012 - Chou, Serena  
 PCH Name: AMERICAN HOUSE T A HOTEL LEBANON

1. REGULATION 55 Pa.Code §2600  
 2600.187(d) - The home shall follow the directions of the prescriber.

2. DESCRIPTION OF VIOLATION  
 Resident #10's record contains orders for Depakote, "two tabs daily in the morning." According to the MAR, the medication was given at 9:00 pm on 10/2012; and from 11/1/2012 to 11/6/2012 at 9:00 am and 9:00 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.

Resident #10's MAR was corrected to follow the directions of the prescribing MD order on the day of inspection.

The medication supervisor will compare the physician order's to the MAR's. The prescriber's direction will be written on the MAR's as ordered. A new order will be obtained from the physician if needed. Signed PO's will be on site for reference to the MAR's as well as with the pharmacy. Discrepancies should be discovered and corrected immediately.

Monthly, the physician orders are compared to the MAR'S when the new MAR's are created by the pharmacist.

Please see attachment.

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

Signature of Legal Entity Representative  
 (Required on EVERY Page) *Melissa Young* 12/5/12

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Melissa Young Co-administrator*      Date *12/05/2012*

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

The above plan of correction is approved as of <u>12-20-12</u> (Date)  The above plan of correction was approved by <u><i>SE</i></u> (Initials)	Verification of Legal Entity Representative Signature <u>12-20-12</u> (Date)  <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
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