

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to JEFFCO HEALTH SERVICES INC

LEGAL ENTITY

To operate JEFFERSON COURT

NAME OF FACILITY OR AGENCY

Located at 417 RT. 28, BROOKVILLE, PA 15825

(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 48

(MAXIMUM CAPACITY)

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 24

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 November 24, 2012 until November 24, 2013,
unless sooner revoked for non-compliance with applicable laws and regulations

No: 406240

Robert E. Robinson

ISSUING OFFICER

R. C. King

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 31 2012

Ms. Julie Peer, Board Member
Jeffco Health Services, Inc.
Jefferson Court
417 Rt. 28
Brookville, Pennsylvania 15825

Dear Ms. Peer:

As a result of the Department of Public Welfare's (Department) licensing inspection on November 19, 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 flourish extending to the right.

Ronald Melusky
Director

Enclosures
License
Violation Report

RECEIVED

Violation Report: 40624 - 11/19/2012 - Phillips, Joseph
PCH Name: JEFFERSON COURT

DEC 3 2012

1. REGULATION 55 Pa.Code §2600

2600.89(b) - Hot water temperature in areas accessible to the resident may not exceed 120°

Western Field Office
Adult Residential Licensing

2a. DESCRIPTION OF VIOLATION

On 11/19/12, at 3p.m., the water temperature at the central bath area measured 125.4 degrees Fahrenheit.

On 11/19/12, at 3p.m., the water temperature at the kitchenette 1st floor measured 125.6 degrees Fahrenheit.

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 Mixer valve replaced on hot water tank - See attached receipt and pictures (Attachment A)
- ② Policy and procedure wrote and implements (Attachment B)
- ③ Water temperature will be checked weekly and logged on the flow sheet.

Repeat Violation: No	Date(s) of Previous Violation(s):	
Signature of Legal Entity Representative <i>Michele Nestlerode</i>		
Printed Name and Title of Legal Entity Representative <i>Michele Nestlerode</i>		Date <i>12-3-12</i>

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

The above plan of correction is approved as of 12-3-12
(Date)

The above plan of correction was approved by [Signature]
(Initials)

Plan of correction implementation status as of 12-3-12
(Date)

Fully Implemented

Partially Implemented - Adequate Progress *12-3-12*

Partially Implemented - Inadequate Progress

Not Implemented

RECEIVED

Violation Report: 40624 - 11/19/2012 - Phillips, Joseph
PCH Name: JEFFERSON COURT

DEC 3 2012

1. REGULATION 55 Pa. Code §2600

2600.141(a)(2) - The medical evaluation must include the following: (1) through (10)

Western Field Office
Adult Residential Licensing

2a. DESCRIPTION OF VIOLATION

The medical evaluation for resident #1, dated 8/20/12, does not include medication regimen.

The medical evaluation for resident #2, dated 7/13/12, does not include medication regimen.

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 Telephoned Physicians offices for resident #1 and #2 and received permission to attach physicians orders to the DME. (See attached DME, physicians orders + nurses note attachment C)
- ② Facility Policy & Procedure reviewed & updated (See attachment D)
- ③ All medical evaluations will be reviewed by facility administrator, to ensure document is completed @ its entirety and all attachments are included, prior to filing in the residents chart
- ④ If the medical evaluation is missing any information or attachments the LPN, Resident Care Coordinator will telephone the physicians office and request to include the missing information. LPN Resident Care Coordinator will document the date and time of the call, who she spoke to, reason for the call & the Physician's office response to the request.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Michele Nestlerode

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

Michele Nestlerode

Date 12-3-12

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

The above plan of correction is approved as of

12-3-12
(Date)

Plan of correction implementation status as of 12-3-12
(Date)

- Fully Implemented *12-3-12*
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

The above plan of correction was approved by

[Signature]
(Initials)

1. REGULATION 55 Pa.Code §2600

2600.227(d) - Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services.

Western Field Office

Adult Residential Licensing

2a. DESCRIPTION OF VIOLATION

Resident #2's support plan, dated 9/14/12, does not indicate the care and services the home will provide related to the resident's diagnoses of depression, edema, cellulitis, and hiatal hernia with reflux.

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 Support Plan of Resident #2 was updated and all diagnosis were added. (See attachment E)
- ② Policy and Procedure reviewed & updated (See attachment F)
- ③ All completed Support Plans will be reviewed by facility administrator.
- ④ Facility administrator will ensure each Residents support plan addresses the care & services the facility will provide the resident.

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

Signature of Legal Entity Representative (Required on EVERY Page) Michele Nestlerode

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

Date 12-3-12

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

The above plan of correction is approved as of 12-3-12 (Date)

The above plan of correction was approved by (Initials)

Plan of correction implementation status as of 12-3-12 (Date)

- Fully Implemented 12-3-12
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented