

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to COUNTRY MEADOWS ASSOCIATES  
LEGAL ENTITY

To operate COUNTRY MEADOWS OF WYOMISSING II  
NAME OF FACILITY OR AGENCY

Located at 1802 TULPEHOCKEN ROAD, WYOMISSING, PA 19610  
(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 166  
(MAXIMUM CAPACITY)  
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 60

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 March 26, 2013 until March 26, 2014  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 205040

*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

MAR 26 2013

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

RE: Country Meadows of Wyomissing II  
1802 Tulpehocken Road  
Wyomissing, Pennsylvania 19610

Dear Mr. Leader:

As a result of the Department of Public Welfare's (Department) licensing inspection on December 11, 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.

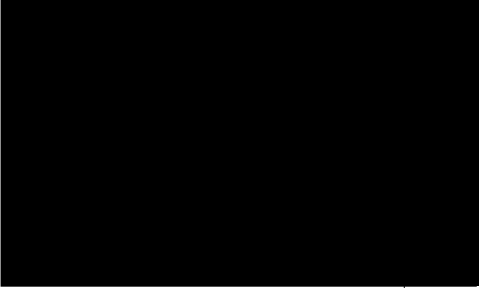
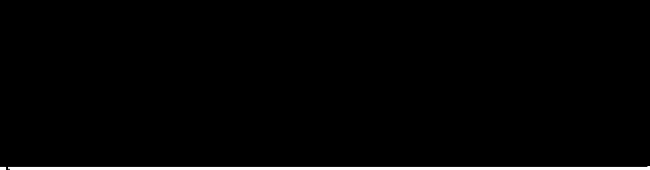
Sincerely,

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: COUNTRY MEADOWS OF WYOMISSING II		License Number: 205040
Address: 1802 TULPEHOCKEN ROAD, WYOMISSING, PA 19610		County: Berks
Administrator: Rayann Maxey		Region: NORTH
Legal Entity Name: COUNTRY MEADOWS ASSOCIATES		
Legal Entity Address: 830 CHERRY DRIVE, HERSHEY, PA 17033		
<b>Certificate(s) of Occupancy</b>		
C-2 LP	I-1	
03/06/1998	12/08/2010	
L&I	Borough of Wyomissing	
<b>Staffing Hours</b>		
Resident Support: 0	Total Daily Staff: 157	Waking Staff: 118
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
<b>Reason(s) for inspection(s)</b>		
Renewal		
<b>On-Site Inspections Dates and Department Representatives On-Site</b>		
12/11/2012: Novak, Ryan; Rushin, Julienne		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b>		
<b>Other Details</b>		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 166 Number of Residents Served: 114 Secured Dementia Care Unit In Home: Yes Area: N/A Secured Dementia Unit Capacity, if Applicable: 60		Number of Residents who: 
		

Violation Report: 20504 - 12/11/2012 - Novak, Ryan  
 PCH Name: COUNTRY MEADOWS OF WYOMISSING II

**1. REGULATION 55 Pa.Code §2600**  
 2600.105(g)(2) - Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

**2a. DESCRIPTION OF VIOLATION**  
 The dryer duct vents exiting into the courtyard of the secure dementia unit near the patio were caked with lint. This poses a possible fire hazard.

**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 dryer vents exiting into the courtyard of the secure dementia unit near the patio were cleaned on December 11, 2012.  
 All other dryer duct vents were checked for lint accumulation and cleaned.  
 Training was provided to maintenance staff on December 12, 2012 to ensure compliance.  
 Ongoing the maintenance director or designee will provide routine audits and cleaning to ensure dryer duct vents are lint free.

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

Signature of Legal Entity Representative  
 (Required on EVERY Page) *Michelle Hamer*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Michelle Hamer, Sr VP of Operations*      Date *12/27/12*

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

The above plan of correction is approved as of <u>12/28/13</u> (Date)	Plan of correction implementation status as of <u>12/28/13</u> (Date)
The above plan of correction was approved by <u><i>MH</i></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