

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to WESTMINSTER WOODS INC
LEGAL ENTITY

To operate WESTMINSTER WOODS
NAME OF FACILITY OR AGENCY

Located at HOMESTEAD BUILDING, 360 WESTMINSTER DRIVE, HUNTINGDON, PA 16652
(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 34
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.
(MAXIMUM CAPACITY)

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 June 3, 2013 until June 3, 2014,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 360670

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



JUN 03 2013

Ms. Deborah J. Barefoot, Executive Director
Westminster Woods, Inc.
Westminster Woods
Homestead Building
360 Westminster Drive
Huntingdon, Pennsylvania 16652

Dear Ms. Barefoot:

As a result of the Department of Public Welfare's (Department) licensing inspection on March 5, 2013, 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 "R. Melusky", written over a horizontal line.

Ronald Melusky
Director

Enclosures
License
Violation Report

Violation Report: 36067 - 03/05/2013 - McCloskey, Jason
 PCH Name: WESTMINSTER WOODS

1. REGULATION 55 Pa.Code §2600

2600.65(b) - Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following:

- (1) Resident rights.
- (2) Emergency medical plan.
- (3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P.S. §§ 10225.101-10225.5102).
- (4) Reporting of reportable incidents and conditions.

2a. DESCRIPTION OF VIOLATION

Ancillary Staff Persons A and B did not receive orientation in reportable incident policies and the emergency medical plan.

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.

Ancillary Staff Persons A and B received orientation in reportable incident policies and the Emergency Medical Plan as indicated on the attached orientation forms.

Effectively immediately all new hired Ancillary Staff will receive this orientation within 40 scheduled working hours, sign and date form. Completed form will be placed in Human Resource File. Monthly monitoring for compliance will be completed by the HR Director and or designee.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Nancy A. Luke*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Nancy A. Luke Personal Care Admin.</i>	Date <i>March 28, 2013</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 3-28-13
 (Date)

The above plan of correction was approved by *SL*
 (Initials)

Plan of correction implementation status as of 3-28-13
 (Date)

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

Violation Report: 36067 - 03/05/2013 - McCloskey, Jason
 PCH Name: WESTMINSTER WOODS

1. REGULATION 55 Pa.Code §2600

2600.84 - Heat sources, such as steam and hot heating pipes, water pipes, fixed space heaters, hot water heaters and radiators exceeding 120°F that are accessible to the resident must be equipped with protective guards or insulation to prevent the resident from coming in contact with the heat source.

2a. DESCRIPTION OF VIOLATION

On 3/5/13, at 11:00 am, the temperature of the electric heater in the bathroom of the room occupied by Resident #1 was 134.7 degrees Fahrenheit. There was no protective guard in place to prevent residents from coming into contact with the grill of the heater.

On 3/5/13 at 12:00 pm, the temperature of the air coming out of the two vents in the hallway between the personal care home and the commons area dining area was over 230 degrees Fahrenheit. There were no guards in place to prevent residents from coming in contact with the hot air stream or the vent grills.

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.

On March 28, 2013
 Electric heater in Resident #1 bathroom and 2 vents in the hall way were disabled (locked out at the breakers) while the Maintenance Supervisor investigates for a solution to keep temperatures from exceeding 120°F.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) Nancy A. Luke

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Nancy A Luke Date March 28, 2013
Personal Care Admin

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The above plan of correction is approved as of <u>3-28-13</u> (Date)	Plan of correction implementation status as of <u>3-28-13</u> (Date)
The above plan of correction was approved by <u>NC</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

Violation Report: 36067 - 03/05/2013 - McCloskey, Jason
 PCH Name: WESTMINSTER WOODS

1. REGULATION 55 Pa.Code §2500
 2600.89(b) - Hot water temperature in areas accessible to the resident may not exceed 120°F.

2a. DESCRIPTION OF VIOLATION
 On 3/5/13 at 6:15 pm, the water temperature at the sink in the first floor activity room was 123.4 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.

Water heater has been adjusted to 118° maximum. Water temperature is being monitored by the Maintenance Department daily at the sink in activity room for two weeks and then monthly. (Attached log). If the temperature is found to be above 120° the Maintenance Supervisor will further investigate for the need to install a mixing valve on activity room sink to regulate temperature.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative (Required on EVERY Page) Nancy A. Luke

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Nancy A. Luke
Personal Care Admin. Date March 28, 2013

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 (Initials)

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- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 36067 - 03/05/2013 - McCloskey, Jason
 PCH Name: WESTMINSTER WOODS

1. REGULATION 55 Pa.Code §2600

2600.132(c) - A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

2a. DESCRIPTION OF VIOLATION

The fire drill record for the drills conducted on 1/27/13 and 2/15/13 does not indicate that all residents were evacuated from 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.

All Maintenance Staff were Re-educated on March 12, 13 on the procedure to complete the "Fire Drill Record" indicating all Residents were evacuated from the home. This will be monitored monthly by the Director of Environmental Services or designee for compliance. (Attached education record)

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Nancy A. Luke

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

Nancy A Luke
 Personal Care Admin.

Date March 28, 2013

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The above plan of correction was approved by *NS*
 (Initials)