

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to PLEASANT VIEW RETIREMENT COMMUNITY  
LEGAL ENTITY

To operate PLEASANT VIEW RETIREMENT COMMUNITY  
NAME OF FACILITY OR AGENCY

Located at 544 NORTH PENRYN ROAD, MANHEIM, PA 17545  
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

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ADDRESS OF SATELLITE SITE

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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 191  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.  
(MAXIMUM CAPACITY)

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 18

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 July 30, 2013 until August 29, 2013,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 321850

*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

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55 Pa.Code Chapter 2600: Personal Care Homes

(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from August 29, 2013 until August 29, 2014,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 321850

*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

AUG 01 2013

Ms. Jolynn Carl, Administrator  
Pleasant View Retirement Community  
544 North Penryn Road  
Manheim, Pennsylvania 17545

Dear Ms. Carl:

As a result of your personal care home's recent adjustment of the use of physical space, we are issuing a revised license under the authority of 55 Pa.Code Ch. 2600 (relating to Personal Care Home Licensing). The revised license indicates a secured dementia care unit licensed capacity of 18 for your personal care home. The expiration date of the license remains unchanged. Your revised license is enclosed.

Sincerely,

A handwritten signature in black ink that reads "Ronald Melusky" followed by a stylized flourish or initials.

Ronald Melusky  
Director

Enclosure  
License



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

Ms. Jolynn Carl, Administrator  
Pleasant View Retirement Community  
544 North Penryn Road  
Manheim, Pennsylvania 17545

Dear Ms. Carl:

As a result of the Department of Public Welfare's licensing inspection on June 12, 2013, June 13, 2013 and July 1, 2013, and the corrections you have made after our inspection, we have found the above personal care home to be in compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes).

Your regular license for the period August 29, 2013 until August 29, 2014 was issued on June 13, 2013. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink that reads "Ronald Melusky" followed by a stylized flourish.

Ronald Melusky  
Director

Enclosures  
License  
Violation Report



Violation Report: 32185 - 06/12/2013 - Rouse, McKinley  
PCH Name: PLEASANT VIEW RETIREMENT COMMUNITY

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.

2a. DESCRIPTION OF VIOLATION

Direct Care Staff Person [redacted] hired 1/14/13, does not have a high school diploma, GED diploma or 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.

1. Importance of Regulation - Confirm education requirements for employ.
2. How was Reg. violated? - No confirmation existed @ time of survey.
3. What Caused violation? - missing documentation
4. What can be done right away to fix violation? - Prior to surveyors departure @ time of survey, Pleasant View Assist. Admin. contacted school to immediately fax confirmation of school graduation. Fax received and attached. req. st was added to my weekly check off list to meet regulatory.
5. What can be done to prevent future violations? - <sup>OBTAIN</sup> ~~Include~~ <sup>Required</sup> documentation PRIOR to first day of work to ensure compliance. High school diploma or GED
6. Who will be responsible for preventing future violations? - Administrator  
A signed, written and notarized affidavit from Staff Person [redacted] attesting to receipt of a high school diploma was obtained on 7/24/13. JE

[Redacted signature area]

[Redacted signature area]

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>John Carl</i>	Date <i>7/26/13</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 7/29/13 (Date)

Plan of correction implementation status as of 7/29/13 (Date)

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

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

Violation Report: 32185 - 06/12/2013 - Rouse, McKinley  
PCH Name: PLEASANT VIEW RETIREMENT COMMUNITY

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.

2a. DESCRIPTION OF VIOLATION

On 06/13/13, the bed in room 139 did not have a source of light that could 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. Why is Regulation Important? Allows for Resident to Access Lighting At anytime to ensure Safety
2. How was Regulation Violated? there was no bed side lamp Accessible To Resident @ Time of Survey.
3. What Caused Violation? missing Lamp @ bedside
4. What can be done right away to fix violation? meet w/ Resident To Review best placements for accessibility. Light by bedside now in place.
5. What can be done to prevent future violations? Institute <sup>Quarterly</sup> Room Checks as part of QA program, by Direct Care Staff. Audits sheets are Returned to Administrator upon Completion. \*
6. Who will be responsible for future violations? Administrator

\* Audits are reviewed by Administrator and any non-compliance are corrected within 24 hours.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

*John Carl*

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

John Carl

Date

7-16-13

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

The above plan of correction is approved as of

7/29/13  
(Date)

Plan of correction implementation status as of

7/29/13  
(Date)

The above plan of correction was approved by

*JC*  
(Initials)

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

Violation Report: 32185 - 06/12/2013 - Rouse, McKinley  
PCH Name: PLEASANT VIEW RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600

2600.133(a)(1) - If the home serves nine or more residents, signs bearing the word "EXIT" in plain legible letters shall be placed at all exits.

2a. DESCRIPTION OF VIOLATION

On 06/13/2013, the 2 sets of doors leading from the main dining room to the hallway and lobby area did not have exit signs.

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. Why is the regulation important? - Provides direction in an emergency
2. How was regulation violated? - Signs not @ all exits.
3. What caused the violation? - The exit signs were not above appropriate door way leading to exit.
4. What can be done right away to fix violation? - Temporary exit signs installed until permanent signs arrived. Permanent signs now installed.
5. What can be done to prevent future violations? - Quarterly audits completed throughout building reported to Admin. To ensure compliance. Any issues of non-compliance will be corrected w/24 HRS. by maintenance Dept. These reports are shared by
6. Who will be responsible? - Administrator. QA, monthly or as needed.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

*John Carl*

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

John Carl

Date 7/16/13

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

The above plan of correction is approved as of

7/29/13  
(Date)

Plan of correction implementation status as of

7/29/13  
(Date)

The above plan of correction was approved by

*JC*  
(Initials)

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

Violation Report: 32185 - 06/12/2013 - Rouse, McKinley  
PCH Name: PLEASANT VIEW RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600

2600.233(c) - If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

2a. DESCRIPTION OF VIOLATION

On 06/13/2013, the directions for operating the home's locking mechanism were not conspicuously posted near the magnetic lock next to room 110 in the secure dementia unit.

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 Why was Regulation Important? The "Sign" allows for EASY Egress for those NON-demented residents. The sign is used to aid in leaving the unit for staff, visitors, etc.
- ② How was regulation violated? The <sup>(Directions)</sup> "Sign" was not posted at time of survey.
- ③ What caused violation? The missing <sup>(Directions)</sup> "Sign" to allow safe Egress from locked unit.
- ④ What can be done right now to fix the violation? A temporary sign, installed - was hung immediately @ time of survey. (with keypad directions)
- ⑤ What can be done to prevent future violations? <sup>Quarterly</sup> Audits conducted <sup>by direct care staff</sup> reported to <sup>Admin.</sup> Admin. To confirm compliance.
- ⑥ Who is responsible? Administrator <sup>Any non-compliance is corrected immediately by Admin. or Assist.</sup>

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

Signature of Legal Entity Representative (Required on EVERY Page)      *John Carl*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)      John Carl      Date      7/16/13

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The above plan of correction was approved by <u>JE</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented