



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

JUN 25 2014

Ms. Patricia A. Howland, Director
National Health Management, Inc.
4415 Fifth Avenue
Pittsburgh, Pennsylvania 15213

RE: Independence Court of Quakertown
1600 Park Avenue
Quakertown, Pennsylvania 18951
License #: 127030

Dear Ms. Howland:

As a result of the Department of Public Welfare's licensing inspection on April 21, 2014, of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Your regular license for the period July 22, 2014 to July 22, 2015 was issued on April 21, 2014. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink, appearing to read "Matthew J. Jones", with a long horizontal flourish extending to the right.

Matthew J. Jones
Director

Enclosure
License Inspection Summary

Violation Report: 12703 - 04/21/2014 - Colon, Lissette
 PCH Name: INDEPENDENCE COURT OF QUAKERTOWN

1. REGULATION 55 Pa.Code §2600
 2600.225(a) - A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

2a. DESCRIPTION OF VIOLATION
 The initial assessment for resident # 1, admitted 12/23/13, was completed on 1/8/14.

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.

Initial assessment for every resident will be completed within 15 days after admission by Director of Resident Care or Designee.
All new admissions will be checked by the Director of Resident Care or Designee within 10 days of admission.
To ensure compliance with regulation.

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Kevin D. Hook* Date *5/20/14*

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

The above plan of correction is approved as of 5/20/14
 (Date)

Plan of correction implementation status as of 5/20/14
 (Date)

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

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