



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFICATE OF COMPLIANCE**

This certificate is hereby granted to MORGAN HILL SENIOR LIVING LLC  
LEGAL ENTITY

To operate ABINGTON MANOR AT MORGAN HILL-MEMORY CARE VILLAGE  
NAME OF FACILITY OR AGENCY

Located at 5 CEDAR PARK BOULEVARD, EASTON, PA 18042  
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE 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 50  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.  
(MAXIMUM CAPACITY)

**Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 50**

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 July 20, 2015 until January 20, 2016,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 226141

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.



# pennsylvania

DEPARTMENT OF HUMAN SERVICES

JUL 21 2015

Ms. Michelle Gaugler, Executive Director  
Morgan Hill Senior Living LLC  
215 Cedar Park Boulevard  
Easton, Pennsylvania 18042

RE: Abington Manor at Morgan Hill – Memory Care Village  
5 Cedar Park Boulevard  
Easton, Pennsylvania 18042  
License #: 226141

Dear Ms. Gaugler:

As a result of the Department of Human Services' licensing inspection on July 8, 2015 and July 14, 2015 of the above facility, we have found that your facility is in substantial compliance with the regulations, set forth in 55 Pa.Code Ch. 2600 (relating to Personal Care Homes), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because the home is new and not yet serving four or more residents.

In accordance with 55 Pa.Code § 2600.11(b) or 55 Pa.Code § 2800.11(b) (relating to procedural requirements for licensure or approval of personal care homes) a re-inspection of your newly licensed facility will be conducted within 3 months of the effective date of this license. Complete compliance with all applicable regulations is required in order to maintain your license.

During the inspection, violations on the enclosed License Inspection Summary were found. All violations specified on the 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 PROVISIONAL license is enclosed, based on substantial but not complete compliance with 55 Pa.Code Ch. 2600.

Sincerely,

  
Matthew J. Jones  
Director

Enclosures  
License  
License Inspection Summary

**VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

|  |   |                       |
|--|---|-----------------------|
| PCH Name: ABINGTON MANOR AT MORGAN HILL - MEMORY CARE                      |   | License Number: 22614 |
| Address: 5 CEDAR PARK BLVD, EASTON, PA 18042                               |   | County: Northampton   |
| Administrator: Michelle Gaugler  |   | Region: NORTHEAST     |
| Legal Entity Name: Morgan Hill Senior Living LLC                           |   |                       |
| Legal Entity Address: 215 Cedar Park Blvd, Easton, PA 18042                |   |                       |
| <b>Certificate(s) of Occupancy</b>   |   |                       |
| I-1<br>06/01/2010<br>Williams Township                                     |   |                       |
| <b>Staffing Hours</b>  |   |                       |
| Resident Support: NM   | Total Daily Staff: 6                    | Waking Staff: 5       |
| Type of Inspection: Initial  | BHA Docket Number:                      | Notice: Unannounced   |
| <b>Reason(s) for Inspection(s)</b>   |   |                       |
| New  |   |                       |
| <b>On-Site Inspections Dates and Department Representatives On-Site</b>    |   |                       |
| 07/08/2015: Hummel, Jesse; Patton, Leslie                                  |   |                       |
| <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: 50  | Number of Residents who:                |                       |
| Number of Residents Served: 3  | Receive Supplemental Security Income: 0 |                       |
| Secured Dementia Care Unit in Home: Yes                                    | Are 60 Years of Age or Older: 3         |                       |
| Area: Secured Facility   | Have Mental Illness: 0                  |                       |
| Secured Dementia Unit Capacity, if Applicable: 50                          | Have an Intellectual Disability: 0      |                       |
| Number of Residents Served in Secured Dementia Care Unit, if applicable: 3 | Have a Mobility Need: 3                 |                       |
| Number of Current Hospice Residents: 0                                     | Have a Physical Disability: 0           |                       |
| Number of Hospice Residents in past year: 0                                |   |                       |

Violation Report: 22614 - 07/08/2015 - Hummel, Jesse  
 PCH Name: ABINGTON MANOR AT MORGAN HILL - MEMORY CARE

**1. REGULATION 55 Pa.Code §2600**  
 2600.124 - The home shall notify the local fire department in writing of the address of the home, location of the bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.

**2a. DESCRIPTION OF VIOLATION**  
 The facility's notice to the local Fire Department dated 6/18/15 regarding resident's with mobility needs does not include the total capacity of the facility.

**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.

*see enclosed POC*

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

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

|   |                     |
|---|---------------------|
| Printed Name and Title of Legal Entity Representative<br>(Required on EVERY Page) <i>Michelle Gaugler</i> | Date <i>7/13/15</i> |
|---|---------------------|

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

|   |   |
|---|---|
| The above plan of correction is approved as of <u>7-16-15</u><br>(Date)       | Plan of correction implementation status as of <u>7-16-15</u><br>(Date)   |
| The above plan of correction was approved by <i>[Signature]</i><br>(Initials) | <input type="checkbox"/> Fully Implemented<br><input checked="" type="checkbox"/> Partially Implemented - Adequate Progress<br><input type="checkbox"/> Partially Implemented - Inadequate Progress<br><input type="checkbox"/> Not Implemented |

*JJH 7-14-15*

Violation Report 22614-07/08/15

PCH: Abington Manor at Morgan Hill-Memory Care Village

Regulation in Violation: 2600.124

Plan of Correction:

The regulation is important because the fire company needs to know how many residents need assistance in the case of a fire or other emergency so they can be prepared to assist. Having advance knowledge of and the needs of the residents will help the fire department evacuate residents quickly.

The letter to the fire company dated 6/18/15 did not include the license capacity.

A follow up letter has been mailed to the Fire Company Chief indicating the license capacity of the facility. See enclosed copy of letter.

Signature of Legal Entity Representative *Michelle Gaugler*  
Printed Name of Legal Entity Representative Michelle Gaugler  
Date 7/13/15

The Adm or designee will periodically review the required information in this regulation and update the local fire company as needed to maintain compliance. Cp. 7-16-15

Violation Report: 22614 - 07/08/2015 - Hummel, Jesse  
 PCH Name: ABINGTON MANOR AT MORGAN HILL - MEMORY CARE

**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**  
 Department Representatives observed the facility's courtyards. Patio A, Patio B, and the Village Patio all have a gate to exit each courtyard. The gate has a magnetic locking mechanism however there is no device at the gate to deactivate the magnetic lock and open the gate. The gates can only be opened by deactivating the locks on the facility's fire panel located within the facility.  
 It was also observed that the doors leading back into the facility from each courtyard have keypad devices to deactivate the magnetic locking mechanisms on each door. The directions for operating the magnetic locking mechanisms are not posted at or near these devices.

**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.

See enclosed POC

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

|  |                         |
|--|-------------------------|
| Signature of Legal Entity Representative<br>(Required on EVERY Page) | <i>Michelle Gaugler</i> |
|--|-------------------------|

|   |                |
|---|----------------|
| Printed Name and Title of Legal Entity Representative<br>(Required on EVERY Page) | Date           |
| <i>Michelle Gaugler</i>   | <i>7/13/15</i> |

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

|   |   |
|---|---|
| The above plan of correction is approved as of <u>7-16-15</u><br>(Date) | Plan of correction implementation status as of <u>7-16-15</u><br>(Date) |
|---|---|

|   |   |                          |                   |                                     |   |                          |   |                          |                 |
|---|---|--------------------------|-------------------|-------------------------------------|---|--------------------------|---|--------------------------|-----------------|
| The above plan of correction was approved by <u><i>OG</i></u><br>(Initials) | <table style="width:100%;"> <tr> <td><input type="checkbox"/></td> <td>Fully Implemented</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Partially Implemented - Adequate Progress</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Partially Implemented - Inadequate Progress</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Not Implemented</td> </tr> </table> <div style="text-align: right; margin-top: 10px;"> <i>JJA</i><br/> <i>7-14-15</i><br/> </div> | <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 |
| <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 22614-07/08/15

PCH: Abington Manor at Morgan Hill-Memory Care Village

Regulation in Violation: 2600.233(c)

Plan of Correction:

The regulation is important because posting the directions for the operation of key-locking devices, electronic cards systems or other devices that prevent immediate egress help to ensure that persons in the secured dementia care unit who do not have an identified need to be in a secured unit can exit the secured unit on their own and at will.

Gates:

The gates have no device on them to disengage the locking mechanism at the point of the gate. The locks currently are disengaged at the central fire panel.

Keypads will be installed at the point of each patio gate to allow the gate's lock to be unlocked at the point of the gate. A quote from Simplex-Grinnell was signed and the project authorized by the administrator and owners on 7/9/15. A copy of the quote is enclosed. Estimated time of completion by Simplex is 2-3 weeks due to delivery of the components. Upon completion of the installation of the keypads the Administrator will send time stamped pictures to DHS to prove installation of each patio gate keypad.

Keypads at Doors:

The keypads located at the doors that lead into the facility from the lobby and at the three patio doors leading back into the facility did not have the keypad code posted.

The enclosed pictures show each patio keypad (Wing A, Wing B and Dining Room Patios) with the code disguised within a series of numbers. The pictures enclosed also show the two lobby doors leading into the secured area of the facility have pictures with the code disguised within the picture.

The facility will institute monthly environmental rounds starting in July and the code for the keypads will be on the checklist to make sure they are in place.

Signature of Legal Entity Representative

*Michelle Gaudler*

Printed Name of Legal Entity Representative

Michelle Gaudler

Date

7/13/15

CP. T-16-15