



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFICATE OF COMPLIANCE**

This certificate is hereby granted to WESBURY UNITED METHODIST COMMUNITY  
LEGAL ENTITY

To operate WESBURY UNITED METHODIST COMMUNITY  
NAME OF FACILITY OR AGENCY

Located at 31 NORTH PARK AVENUE, MEADVILLE, PA 16335  
(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 110  
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 September 23, 2015 until March 23, 2016,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **446821**

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

SEP 23 2015

Mr. Lawrence Dean Marsteller, Administrator  
Wesbury United Methodist Community  
31 North Park Avenue  
Meadville, Pennsylvania 16335

RE: Wesbury United Methodist Community  
License #: 446821

Dear Mr. Marsteller:

As a result of the Department of Human Services' licensing inspection on September 2, 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 this is a new legal entity operating the home.

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,

A handwritten signature in black ink that reads "Matthew Jones / gop".

Matthew J. Jones  
Director

Enclosure(s)  
License  
License Inspection Summary

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

PCH Name: WESBURY UNITED METHODIST COMMUNITY		License Number: 44682
Address: 31 PARK AVENUE, MEADVILLE, PA 16335		County: Crawford
Administrator: LAWRENCE DEAN MARSTELLER		Region: WEST
Legal Entity Name: WESBURY UNITED METHODIST COMMUNITY		<b>RECEIVED</b> SEP 17 2015 WEST REGION FIELD OFFICE Human Services Licensing
Legal Entity Address: 31 PARK AVENUE, MEADVILLE, PA 16335		
Certificate(s) of Occupancy C-2 LP 06/03/1997 L & I		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 51	Working Staff: 38
Type of Inspection: Full	BHA Docket Number:	Notice: Announced
Reason(s) for Inspection(s) Change Legal Entity		
On-Site Inspections Dates and Department Representatives On-Site 09/02/2015: Breuer, Patricia		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 110 Number of Residents Served: 51 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 0 Number of Hospice Residents in past year: 0		Number of Residents who: Receive Supplemental Security Income: 1 Are 60 Years of Age or Older: 51 Have Mental Illness: 0 Have an Intellectual Disability: 1 Have a Mobility Need: 0 Have a Physical Disability: 1

SEP 19 2015

Violation Report: 44682 09/02/2015 - Breuer, Patricia  
 PCH Name: WESBURY UNITED METHODIST COMMUNITY

WEST REGION FIELD OFFICE  
 Human Services Licensing

1. REGULATION 55 Pa.Code §2600  
 2600.105(g)(1) - To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.

2a. DESCRIPTION OF VIOLATION  
 At approximately 9:30 a.m., there was an accumulation of approximately 1/8 inch of lint, in the lint trap of the dryer on the left in the second floor resident laundry room.  
 There was an accumulation of approximately 1/4 inch of lint in the lint trap of the dryer on the right in the second floor resident laundry room.

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 9/2/2015 the lint traps were cleaned by staff immediately. A plan was discussed and initiated with the Environmental Services Supervisor for the housekeeping staff to include the cleaning of the lint traps to their daily cleaning schedule. On 9/2/15 and 9/3/15, the supervisor educated the Housekeeping staff of this additional responsibility.

On 9/15/2015, the Facilities Policy Manual was updated to include a Resident Laundry Use policy that specified housekeeping's responsibility for cleaning the lint traps. Refer to Attachment I. On 9/15/15, the Cribbs Resident Laundry Policy was updated to include the resident being responsible for cleaning dryer lint traps after each use. Refer to Attachment II, section 6. On 9/15/15, signs were added above each dryer to instruct and remind users to clean the lint traps after each use. See Attachment III and Attachment IV, Section 1.

Ongoing: All new users of the laundry facilities will be informed by the Nurse Manager that the lint traps must be cleaned after each use. Housekeeping will check the lint traps during their regular daily cleaning routine.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Lawrence D. Marsteller*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *LAWRENCE D. MARSTELLER, ADM.* Date *9/19/2015*

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

The above plan of correction is approved as of <u>9/22/15</u> (Date)	Plan of correction implementation status as of <u>9/22/15</u> (Date)
The above plan of correction was approved by <i>[Signature]</i> (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

SEP 19 2015

Violation Report: 44682 - 09/02/2015 - Breuer, Patricia  
PCH Name: WESBURY UNITED METHODIST COMMUNITY

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.107(a) - The administrator shall have a copy and be familiar with the emergency preparedness plan for the municipality in which the home is located.

2a. DESCRIPTION OF VIOLATION

The administrator does not have the emergency preparedness plan for the local municipality.

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 9/14/2015, Wesbury received an email copy of the Crawford County Emergency Operations Plan from the Operations & Training Officer at Crawford County Emergency Management Agency.

On 9/14/15, hardcopies were made of the manual and put in a binder that is labeled appropriately and located just inside the main entrance of the building for easy access to all. Refer to Attachment V, Sections 1 -- 3. On 9/19/15, staff was informed through a mass email as well as a posting on bulletin boards that this manual is located there. See Attachment VI.

Ongoing: It will be the responsibility of the receptionist as well as the administrator to regularly check to see that the manual is still in place.

Immediately - The administrator will thoroughly review and be familiar with the emergency preparedness plan for Crawford County.

2/3  
9/22/15

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

Signature of Legal Entity Representative (Required on EVERY Page) *Lawrence D. Marsteller*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *LAWRENCE D. MARSTELLER, ADM*      Date *9/19/2015*

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

The above plan of correction is approved as of 9/22/15 (Date)

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

Plan of correction implementation status as of 9/22/15 (Date)

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

Violation Report: 44682 - 09/02/2015 - Breuer, Patricia PCH Name: WESBURY UNITED METHODIST COMMUNITY	WEST REGION FIELD OFFICE: Human Services Licensing
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1. REGULATION 55 Pa.Code §2600  
2600.123(b) - Copies of the emergency procedures as specified in § 2600.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.

2a. DESCRIPTION OF VIOLATION  
The home's emergency procedures were not posted in a conspicuous and public place in the home. The emergency procedures were inside the nurses' office.

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 9/2/2015, a copy was made of Wesbury's "Disaster Plan", which contains therein the home's emergency procedures and it was then located at the front entrance area of the building in a conspicuous and public place for easy access to all. See Attachment V, sections 1 - 3.

On 9/2/15, staff supervisors were informed that the manual was located there. On 9/19/15, all staff were informed through a mass email as well as a notice posted on bulletin boards that our Disaster Plan manual is located there. See Attachment VI.

Ongoing, it will be the responsibility of the receptionist as well as the administrator to regularly check to see that the manual is still in place.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
(Required on EVERY Page) *Lawrence D. Marsteller*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>LAWRENCE D. MARSTELLER, ADM.</i>	Date <i>9/19/2015</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!	
The above plan of correction is approved as of <u>9/22/15</u> (Date)	Plan of correction implementation status as of <u>9/22/15</u> (Date)
The above plan of correction was approved by <i>[Signature]</i> (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