



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFICATE OF COMPLIANCE**

This certificate is hereby granted to SOUTH MOUNTAIN MEMORY CARE LLC  
LEGAL ENTITY

To operate SOUTH MOUNTAIN MEMORY CARE  
NAME OF FACILITY OR AGENCY

Located at 201 SOUTH SEVENTH STREET, EMMAUS, PA 18049  
(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 28  
MAXIMUM CAPACITY  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller  
Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 28

Restrictions: \_\_\_\_\_

This certificate is granted in accordance with the Human Services 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 March 20, 2018 until September 20, 2018,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 227211

Robert E. Robinson  
ISSUING OFFICER

Carolyn K. Ellison  
DEPUTY SECRETARY

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.



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DEPARTMENT OF HUMAN SERVICES

MAR 21 2018

Mr. William S. Wall  
Member  
South Mountain Memory Care, LLC  
201 South Seventh Street  
Emmaus, Pennsylvania 18049

RE: South Mountain Memory Care, LLC  
License #227211

Dear Mr. Wall:

As a result of the Department of Human Services' (Department) licensing inspection on March 8, 2018 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.

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,

Jacqueline L. Rowe  
Director

Enclosures  
License  
License Inspection Summary



Violation Report: 22721 - 03/08/2018 - Novak, Ryan  
 PCH Name: SOUTH MOUNTAIN MEMORY CARE

1. REGULATION 55 Pa. Code §2600  
 2600.100(b) - The home shall ensure that ice, snow and obstructions are removed from outside walkways, ramps, steps, recreational areas and exterior fire escapes.

2a. DESCRIPTION OF VIOLATION  
 The exit ramp from the north side rear was covered with snow.

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.

During the removal of all snow from the property the ramp leading from a used wing was overlooked.

Snow was removed on 3/9/18 a 1PM.

Snow removal service provider was made aware that this and ALL walks leading from the facility must be cleared regardless of resident location within the community.

It will be the responsibility of the Administrator/Designees and shift leads to assure that snow is removed at all exits during and after a snowfall.

See attached documentation  
 Picture of cleared ramp  
 Memo to above staff

) Yes. O.G.

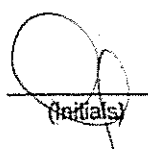
Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *Victoria B Snyder, Executive Director*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Victoria B Snyder</i>	Date <i>3/16/2018</i>
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of 3-16-18  
 (Date)

The above plan of correction was approved by   
 (Initials)

Plan of correction implementation status as of 3-16-18  
 (Date)

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

Violation Report: 22721 - 03/08/2018 - Novak, Ryan  
 PCH Name: SOUTH MOUNTAIN 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**

The directions for operating the home's locking mechanism for the door coming in from the vestibule south end front and north wing front do not open the door. The code posted in 201201, the code to open the door is 123123.

**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.*

Correct during the initial inspection.

The code was inadvertently posted as 201201. This is a general code used to unlock doors from 9a to 9p.

The code 123123 is used at certain doors to allow access 24/7. The door in question required the 123123 code.

New responsibilities assigned to avoid any future concerns.


- 1-The Business Director will be responsible for changing codes.
- 2-Th Life Enrichment Director will be responsible for posting the codes.
- 3-The Administrator and Maintenance Supervisor will audit postings and actual operational code monthly.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *Victoria B Snyder - Executive Director*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Victoria B Snyder* Date *3/16/2018*

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

The above plan of correction is approved as of <u>3-16-18</u> (Date)	Plan of correction implementation status as of <u>3-16-18</u> (Date)
The above plan of correction was approved by  (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