



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFICATE OF COMPLIANCE**

This certificate is hereby granted to SENIOR CARE ON EAST MARKET LLC  
LEGAL ENTITY

To operate AUTUMN HOUSE EAST  
NAME OF FACILITY OR AGENCY

Located at 2618 EAST MARKET STREET, YORK, PA 17402  
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

\_\_\_\_\_  
ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

\_\_\_\_\_  
ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

\_\_\_\_\_  
ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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 150  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller. (MAXIMUM CAPACITY)

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 October 11, 2018 until October 11, 2019,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **334260**

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



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

OCT 15 2018

Mr. Joseph T. Pohlen  
Member  
Senior Care on East Market, LLC  
6157 28<sup>th</sup> Street, Suite E  
Grand Rapids, MI 49546

RE: Autumn House East  
2618 East Market Street  
York, Pennsylvania 17402  
License #: 334260

Dear Mr. Pohlen:

As a result of the Department's Bureau of Human Services Licensing inspection on September 19, 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 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 NEW license is enclosed, based on substantial but not complete compliance with 55 Pa.Code Ch. 2600.

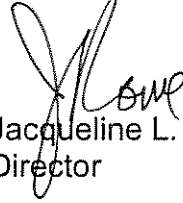
In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services provider application submission experience. To participate in the online applicant survey, launch your web browser and go to [https://www.surveymonkey.com/r/BHSL\\_Application](https://www.surveymonkey.com/r/BHSL_Application).

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential.

Mr. Joseph T. Pohlen

The responses will be reviewed as part of an aggregate of provider applicant responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Rowe', written over the printed name.

Jacqueline L. Rowe  
Director

Enclosure(s)  
License  
License Inspection Summary

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

PCH Name: AUTUMN HOUSE EAST		License Number: 33426
Address: 2618 EAST MARKET STREET, YORK, PA 17402		County: York
Administrator: Amanda Palmer		Region: CENTRAL
Legal Entity Name: SENIOR CARE ON EAST MARKET ST LLC		
Legal Entity Address: 6157 28TH STREET, GRAND RAPIDS, MI 49546		
<b>Certificate(s) of Occupancy</b>		
C-2 LP 11/29/1994 L&I	C-2 LP 4/27/2004 L&I	I-2 05/12/2010 Springettsbury Twp.
<b>Staffing Hours</b>		
Resident Support: 0	Total Daily Staff: 140	Waking Staff: 105
Type of Inspection: Partial	BHA Docket Number:	Notice: Announced
<b>Reason(s) for Inspection(s)</b>		
New		
<b>On-Site Inspections Dates and Department Representatives On-Site</b>		
09/19/2018: Hoover, Douglas		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b>		
Rec'd 10/9/18 GE		
<b>Other Details</b>		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 150 Number of Residents Served: 127 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: 5 Number of Hospice Residents in past year: 20	<b>Number of Residents who:</b> Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 126 Have Mental Illness: 0 Have an Intellectual Disability: 1 Have a Mobility Need: 13 Have a Physical Disability: 1	

Violation Report: 33426 - 09/19/2018 - Hoover, Douglas  
PCH Name: AUTUMN HOUSE EAST

1. REGULATION 55 Pa.Code §2600  
2600.93(a) - Each ramp, interior stairway and outside steps must have a well-secured handrail.

2a. DESCRIPTION OF VIOLATION  
There is a 6 inch step outside of the front door, exit #127, that does not have a handrail.

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.*

2600.93(a)—Each ramp, interior stairway and outside steps must have a well-secured handrail.

Having a well-secured handrail at each ramp, interior stairway and outside steps improves safety. Upon inspection, there is a 6-inch step outside of the front door, exit #127, that does not have a handrail.

After inspection, the maintenance director installed a well-secured handrail outside the front door at exit #127 to promote safety. See attachment #1 photo of handrail at exit #127. All other ramps, interior stairways and outside steps were audited to ensure they had well-secured handrails.

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

Signature of Legal Entity Representative (Required on EVERY Page) *A L Palmer UN PCA*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Amanda L. Palmer Administrator*      Date *10/8/18*

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

The above plan of correction is approved as of 10/9/18  
(Date)

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

Plan of correction implementation status as of 10/9/18  
(Date)

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

Violation Report: 33426 - 09/19/2018 - Hoover, Douglas

PCH Name: AUTUMN HOUSE EAST

1. REGULATION 55 Pa.Code §2600  
2600.103(d) - Food shall be stored off the floor.

2a. DESCRIPTION OF VIOLATION

There was a box of 12/6 count white rolls sitting on the floor of the walk-in freezer.

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.*

2600.103(d)—Food shall be stored off the floor.

Upon Inspection a box of white rolls was found sitting on the floor of the walk-in freezer. Food may never be stored on the floor for sanitary reasons.

After inspection, the box of rolls was discarded for safety reasons. The night before the inspection the administrator did a walk-through of the walk-in freezer and found no food stored on the floor. The cook on shift and dietary director will be responsible for auditing food storage areas daily to ensure no food is stored on the floor, intentionally or accidentally going forward.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

*Amanda L. Palmer*

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

*Amanda L. Palmer Administrator*

Date *10/8/18*

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

The above plan of correction is approved as of 10/9/18  
(Date)

Plan of correction implementation status as of 10/9/18  
(Date)

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

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

Violation Report: 33426 - 09/19/2018 - Hoover, Douglas  
 PCH Name: AUTUMN HOUSE EAST

**1. REGULATION 55 Pa.Code §2600**

2600.104(e) - Breakfast, midday and evening meals shall be served to residents in a dining room except in the following situations:

(1) Service in the resident's room shall be available at no additional charge when the resident is unable to come to the dining room due to illness.

(2) When room service is available in a home, a resident may choose to have a meal served in the resident's room. This service shall be provided at the resident's request and may not replace daily meals in a dining room.

**2a. DESCRIPTION OF VIOLATION**

Breakfast is not served in the dining room. The breakfast meal is delivered to residents in their rooms.

**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.*

2600.104(e)—Breakfast, midday and evening meals shall be served to the residents in a dining room except in the following situations:

(1) Service in the resident's room shall be available at no additional charge when the resident is unable to come to the dining room due to illness.

(2) When room service is available in a home, a resident may choose to have a meal served in the resident's room. This service shall be provided at the resident's request and may not replace daily meals in a dining room.

This regulation is important as it promotes improved socialization for our residents that eat in the dining room areas. At the time of inspection Autumn House East had been serving breakfast in room to all residents for many years at their request. It is our policy that residents could be served in the dining room had they voiced this preference; however, our residents have had a resounding desire to have breakfast delivered in their room for their convenience.

The dietary department will be prepared daily to serve breakfast in H Hall dining room as this is a centrally located dining room within the home. As more residents choose to eat in the dining room for breakfast other dining rooms will be made available to them as necessary immediately. Any resident who still wishes to eat breakfast in their room will be accommodated and any resident who chooses to eat breakfast in the dining room will be served, always the same meal choices. Upon admission residents will be educated on the choice to have breakfast in the dining room or in their room and their preference will be granted. They will also be notified that they may change their mind at any time and staff will ensure they are served. All current residents were notified as well that they may choose to eat in the dining room or in their room for breakfast. Our policy continues that any resident who chooses to eat in their room due to illness is never charged an additional fee. Any resident who requests to have room service trays taken to their room may do so and dietary staff will be ready to serve all daily meals in the dining room.

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

Signature of Legal Entity Representative (Required on EVERY Page) *A L Palmer*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Amanda L Palmer Administrator</i>	Date <i>10/8/18</i>
---	---------------------

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

The above plan of correction is approved as of <u>10/10/18</u> (Date)	Plan of correction implementation status as of <u>10/10/18</u> (Date)
The above plan of correction was approved by <u>GCE</u> (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

Violation Report: 33426 - 09/19/2018 - Hoover, Douglas

PCH Name: AUTUMN HOUSE EAST

**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 are not posted in a conspicuous and public place in the home.

**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.*

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.

It is important to have copies of emergency procedures posted for all to see so that they can familiarize themselves with the information and be better prepared in the event of an emergency. At the time of inspection, the emergency plan binder was not able to be located in its usual place in the common activities room.

After the inspection two new emergency policy/plan binders were made and placed in conspicuous and public areas in the home. A red emergency policy/plan binder was placed back in its usual place in the activities room and another was placed at the desk in the front lobby. A sign was posted at the bulletin board with important postings alerting visitors, residents, families, etc. that an emergency plan binder is located at the desk in the front lobby. The administrator will audit weekly for four weeks to ensure the binders stay placed in their appropriate locations. See attached photos of emergency binders and posting #2-5.

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

Signature of Legal Entity Representative  
(Required on EVERY Page) *Amanda L. Palmer*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Amanda L. Palmer Administrator* Date *10/8/18*

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

The above plan of correction is approved as of 10/10/18  
(Date)

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

Plan of correction implementation status as of 10/10/18  
(Date)

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

Violation Report: 33426 - 09/19/2018 - Hoover, Douglas  
PCH Name: AUTUMN HOUSE EAST

1. REGULATION 55 Pa.Code §2600

2600.126(a) - A professional furnace cleaning company or trained maintenance staff person shall inspect furnaces at least annually. Documentation of the inspection shall be kept.

2a. DESCRIPTION OF VIOLATION

The inspection certifications expired on 8/10/18 for the A and C Hall boilers.

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.*

2600.126(a)--A professional furnace cleaning company or trained maintenance staff person shall inspect furnaces at least annually. Documentation of the inspection shall be kept.

Proper inspections and maintenance of furnaces are imperative to keep them running effectively and safely. Upon inspection certifications expired on 8/10/18 for A and C Hall boilers.

The regional maintenance director scheduled an inspection for 10/8/18 for any boilers in the building that had expired certifications or were close to expiring. The inspection was completed 10/8/18. The maintenance director will audit boiler inspection dates as part of the PM plan to ensure compliance with annual inspections. See attached certification information for boilers inspected on 10/8/18 #7-10: <sup>Corr of</sup> <sub>U-G</sub>

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

Signature of Legal Entity Representative (Required on EVERY Page) *C J P L WPCMA*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Amanda L. Palmer Administrator* Date *10/8/18*

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

The above plan of correction is approved as of <u>10/10/18</u> (Date)	Plan of correction implementation status as of <u>10/10/18</u> (Date)
The above plan of correction was approved by <u>GCE</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