



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFICATE OF COMPLIANCE**

This certificate is hereby granted to HSL BLANDON SUBTENANT LLC  
LEGAL ENTITY

To operate KEYSTONE VILLA AT FLEETWOOD  
NAME OF FACILITY OR AGENCY

Located at 501 HOCH ROAD, BLANDON, PA 19510  
(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 65  
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 June 4, 2019 until June 4, 2020,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **227700**

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.



June 6, 2019

Mr. Kevin McCollum  
Vice President  
HSL Blandon Subtenant LLC  
c/o ReNew Reit  
One SeaGate, Suite 1500  
Toledo, Ohio 43604

RE: Keystone Villa at Fleetwood  
501 Hoch Road  
Blandon, Pennsylvania 19510  
License # 227700

Dear Mr. McCollum:

As a result of the Department's Bureau of Human Services Licensing inspection on April 4, 2019 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, citations on the enclosed violation report were found. All citations specified on the violation report must be corrected by the dates specified on the violation report 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

Mr. Kevin McCollum

confidential. 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". The signature is fluid and cursive, with the first letter "J" being particularly large and stylized.

Jacqueline L. Rowe  
Director

Enclosures  
License  
Violation Report



Violation Report: 22770 - 04/04/2019 - Dumas, Gerald  
 PCH Name: KEYSTONE VILLA AT FLEETWOOD

1. REGULATION 55 Pa.Code §2600  
 2600.141(a)(2) - The medical evaluation must include the following: (1) through (10)

2a. DESCRIPTION OF VIOLATION  
 The medical evaluation ( D.M.E.), for resident # 1 dated 12/18/18 states " see attached" for medical dignosis Physical/Mental. This information was not attached to the resident's D.M.E.

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.

What:  
 Physical and Mental Medical Diagnoses will be attached to the DME if the DME states "see attached".

Who:  
 The Executive Director or designee will ensure that the physical and mental medical diagnoses are attached to the DME's stating "see attached" by completing an audit of new admission and annual DME's monthly.

How:  
 The Executive Director or designee will re-train staff members who complete DME's on proper completion of the document by May 17, 2019.

Ongoing:  
 For quality assurance, the Executive Director will review new admission and annual DME's for accuracy each month.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *Kara Dolson*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Kara Dolson</i>	Date <i>5/10/19</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>5-14-19</u> (Date)  The above plan of correction was approved by <u>AG</u> (Initials)	Plan of correction implementation status as of <u>5-14-19</u> (Date)  <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
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