

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to NHS PENNSYLVANIA

LEGAL ENTITY

To operate EDGEWATER PSYCHIATRIC CENTER

NAME OF FACILITY OR AGENCY

Located at 1071 PAGE ROAD, HARRISBURG, PA 17111

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE

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 8
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 June 22, 2010 until June 22, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **321000**

Robert E. Robinson

ISSUING OFFICER

Kevin T. Casey

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.

PW 628 - 4/02



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
PO BOX 2675
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

JUL 02 2010

PHONE: (717) 783-3670
FAX: (717) 783-5662

Mr. Michael J. Breslin, Chief Operating Officer
NHS Pennsylvania
4391 Sturbridge Drive
Harrisburg, Pennsylvania 17110

RE: Edgewater Psychiatric Center
1071 Page Road
Harrisburg, Pennsylvania 17111

Dear Mr. Breslin:

As a result of the Department of Public Welfare's licensing inspection on April 2, 2010 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed 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. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

Sincerely,

A handwritten signature in cursive script that reads "Kevin T. Casey".

Kevin T. Casey
Deputy Secretary

Enclosures
License
Violation Report

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME Edgewater Psychiatric Center, 1071 Page Road, Harrisburg, PA 17111		CURRENT LICENSE NUMBER 321000
INSPECTION DATE(S) (Include all dates of the inspection) 4/2/10	REGIONAL REPRESENTATIVE Lori Gensil and Denny Granahan	
SIGNATURE OF LEGAL ENTITY 	DATE 4/14/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION
		DATE 5/10/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
26b. The quality management plan shall address the periodic review and evaluation of the following: (1) Reportable incident and condition reporting procedures. (2) Complaint procedures. (3) Staff person training. (4) Licensing violations and plans of correction, if applicable. (5) Resident or family councils, or both, if applicable.	The home's quality management plan review does not include any of the specific required areas.	04/14/2010 04/15/2010 04/15/2010	Immediate: ① Clinical Staff Supervisor to develop the Quality Management Plan binder in compliance with DPW regulation 2600:26b. ② The administrator will introduce the Quality Management Plan Binder with the staff at the staff meeting scheduled for 04/15/2010. Ongoing: As changes occur, the Clinical Staff Supervisor will update the Quality Management Plan binder. The Administrator will review the Quality Management Plan binder at subsequent staff meetings.	6/9/10

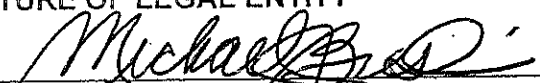
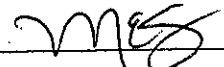
APR 19 2010

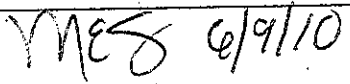
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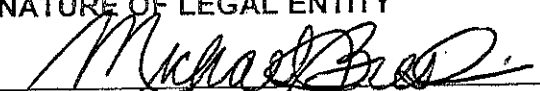
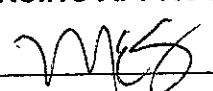
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54a Direct care staff persons shall have the following qualifications: (2) Have a high school diploma, GED diploma or active registry status on the Pennsylvania nurse aide registry.	Direct care staff member A, date of hire 4/20/09, does not have a high school diploma, GED or active registry status on the PA nurse aide registry.	04/05/2010 04/15/2010	Immediate: Psych. Tech. "A" contacted his High School to receive a copy of his High School transcripts. "A" was instructed that the process of receiving the transcripts could take up to two weeks or longer due to the fact that A graduated High school in the 1950's. Nursing Coordinator/Staff Trainer to update "A"'s file upon receipt of High School Transcripts. Psych Tech "A" will not be scheduled to work at the PCH until appropriate transcripts are received. Ongoing: NHS Edgewater HR Field Rep to review all incoming new hire folders for completeness of DPW Regulation 2600:54a. Nursing Coordinator/Staff Trainer along with the Clinical Staff Supervisor to review files for completeness regarding DPW Regulation 2600:54a. PCH administrator to be apprised immediately should future issues arise.	6/9/10

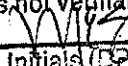
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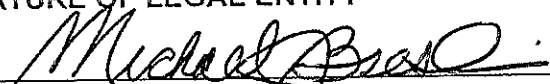
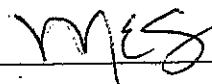
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64c An administrator shall have at least 24 hours of annual training relating to the job duties.	Administrator, [REDACTED] has 23.5 hours of annual training for training year 2009.	04/12/2010 04/15/2010	Immediate: Administrator, [REDACTED] will be participating in a PCH training sponsored by DPW in a partnership with Temple University. Administrator, [REDACTED] will complete 24 ½ training hours for the calendar year 2010 to ensure compliance to DPW regulation 2600:64c. Ongoing: The Nursing Coordinator/Staff Trainer will track DPW Administrator Certificate Training Hours for the administrator and the Clinical Staff Supervisor who has an administrator certificate, giving the administrative staff quarterly updates of needed hours to guarantee compliance to maintaining needed credits.	 6/9/10

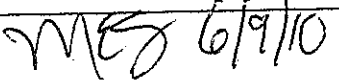
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85a Sanitary conditions shall be maintained.	The resident bathroom near the main entrance has a strong urine odor and the area around the base of the toilet has a build up of urine and brown grime.	04/02/2010 04/15/2010 04/15/2010 04/02/2010	Immediate: ① The floor was sanitized by maintenance supervisor. ② Administrator to educate staff on the need to sanitize all bathrooms on a daily basis at staff meeting. ③ Nursing supervisor to perform daily follow up to sanitary conditions, having Psych. Tech. perform additional sanitation as necessary. Ongoing: Administrator to spot check sanitary conditions on a weekly basis following through on the need for additional sanitation steps by the Psych. Techs.	Steps have been taken to correct violation; full compliance is not verifiable 04/19/10 Date  Initials (DPW)

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88a Floors, walls, ceilings, windows, doors and other surfaces shall be clean, in good repair and free of hazards.	The staircase leading up to the two resident bedrooms in the loft area was dirty with small particles of dirt and food crumbs.	04/02/2010 04/05/2010 04/07/2010	Immediate: ① Maintenance supervisor cleaned carpet on stairs with existing dust buster. ② A new vacuum was purchased with the ability to clean stairs. Nursing supervisor to perform daily follow up to cleanliness of stairs, having Psych. Tech. perform additional cleaning. Ongoing: Maintenance Supervisor contacted professional flooring installer to give input regarding the best alternative to the current stairwell covering; an on-site consultation is anticipated by 04/30/2010. Administrator will monitor cleanliness of stairwell on a weekly basis reporting to the nursing supervisor to make arrangement for any additional cleaning by Psych. Tech..	 6/9/10