

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to GARDEN SPOT VILLAGE

LEGAL ENTITY

To operate GARDEN SPOT VILLAGE

NAME OF FACILITY OR AGENCY

Located at MOUNTAIN VIEW AND LAUREL VIEW, 433 S. KINZER AVENUE, NEW HOLLAND, PA 17557

(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 110
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 30

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 9, 2010 until September 9, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 321940

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

SEP 14 2010

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

Ms. Denise J. Hoak, Director of Assisted Living
Garden Spot Village
Mountain View and Laurel View
433 S. Kinzer Avenue
New Holland, Pennsylvania 17557

Dear Ms. Hoak:

As a result of the Department of Public Welfare's licensing inspection on August 4, 2010 and August 5, 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 Garden Spot Village, 433 S. Kinzer Avenue, New Holland, PA 17557		CURRENT LICENSE NUMBER 321940	
INSPECTION DATE(S) (include all dates of the inspection) August 4 and 5, 2010		REGIONAL REPRESENTATIVE Lynn Loudenslager and Tom Roth	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Janet Brean Hills / J of Ah</i>		DATE 8/25/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Michael E. Stran</i>
			DATE 8/26/10

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
91 Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control center, municipal emergency management agency and personal care home complaint hotline shall be posted on or by each telephone with an outside line.	The telephones in resident rooms 100, 103, 106 and 110 did not have the required phone numbers on or posted near the telephone. PCH Division Central Region Field Office	Completed 8/13/10	Labels with all of the DPW required telephone numbers were affixed to all Laurel View residents' telephones on 8/13/10. Telephone labels will be affixed to new residents' telephones on the date of their admission to Laurel View. A reminder to affix these labels to resident telephones has been included on Laurel View's Admission Checklist. <i>SEE Attachment 1a, b, c + admiz. list</i>	<i>MES 8/26/10</i>

AUG 26 2010

RECEIVED

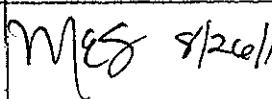
**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

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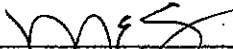
INSPECTION DATE(S) (Include all dates of the inspection) August 4 and 5, 2010	REGIONAL REPRESENTATIVE Lynn Loudenslager and Tom Roth
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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 8/25/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 8/26/10
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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
101j7 Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on/off at bedside.	There were no sources of light within bedside reach in resident rooms 100 or 103.	Completed 8/13/10	As of 8/13/10 all Laurel View residents now have bedside tables and lamps. If new residents do not have bedside tables and lamps, Garden Spot Village will provide these for the residents. A reminder to make certain that bedside tables and lamps are provided for new Laurel View residents has been included on Laurel View's Admission Checklist. <i>See Attachment 1a, c + Admiss. list</i>	 8/26/10

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231b A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner, documented on a form provided by the Department, within 60 days prior to admission. Documentation shall include the resident's diagnosis of Alzheimer's disease or other dementia and the need for the resident to be served in a secured dementia care unit.	Resident 1 was admitted to the secured dementia unit on 6/14/10. The resident's medical evaluation was dated 7/7/10, which was after the resident's admission date.	As of 8/5/10	Residents will not be admitted to Laurel View unless a medical evaluation has been completed prior to the date of admission by a physician, physician's assistant, or a certified registered nurse practitioner prior to the date of admission. This medical exam must be current within 60 days prior to the resident's admission date. There will be no exceptions to this practice. Further, all physical forms will include both a recorded diagnosis of dementia and of the need to be served in a secured dementia area. Prior to admission, all admission paperwork will be reviewed by both the Personal Care Home Administrator and the nurse supervisor. The Laurel View Admission Checklist now notes the requirements and correct time frame for completion of the physical form. <i>See adm. list</i>	Steps have been taken to correct violation; full compliance is not verifiable 8/26/10 JAMES Date Initials (DPW)

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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Brian Mills / EJA</i>	DATE 8/25/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>MES</i>	DATE 8/26/10
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234a Within 72 hours of the admission or within 72 hours prior to the resident's admission to the secured dementia care unit, a support plan shall be developed, implemented and documented in the resident record.	Resident 2 was admitted to the secured dementia unit on 6/14/10. The resident's support plan was not completed within 72 hours. The support plan was dated 6/24/10, which was 10 days after the resident's admission date.	As of 8/5/10	<p>All new admission Support Plans will be completed within 72 hours prior to or within 72 hours following the resident's admission to Laurel View.</p> <p>Whenever possible, the Support Plan will be completed with the POA, responsible party, and/or other family members along with the other Laurel View admission paperwork.</p> <p>The Laurel View Admission Checklist now includes the correct time frames for Support Plan completion.</p> <p>All Laurel View admission paperwork will be reviewed by both the unit Personal Care Home Administrator and the nurse supervisor.</p> <p><i>SEE Admiss. list</i></p>	<p>Steps have been taken to correct violation; full compliance is not verified</p> <p><i>8/26/10 MES</i> Date Initials (DPW)</p>

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252 Each resident's record shall include the following information: (2) Race, height, weight, color of hair, color of eyes, religious affiliation, if any, and identifying marks.	The records for Residents 2, 3 and 4 did not include hair or eye color.	As of 8/9/10.	All Assisted Living face sheets have been updated to include the residents' race, height, weight, color of hair, color of eyes, religious affiliation, and any identifying marks. A staff member has been appointed to do chart audits every 4 months to assure that all required information is included in all resident charts. <i>SEE Attachment 2A, b, c</i>	<i>MES 8/26/10</i>