

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to NEW VISIONS OF SOUTH CENTRAL PA, INC.

LEGAL ENTITY

To operate NEW VISIONS INC

NAME OF FACILITY OR AGENCY

Located at 103 DEERVIEW DRIVE, NEWVILLE, PA 17241

(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 4  
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 13, 2012 until June 13, 2013,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 328700

*Robert E. Robinson*

ISSUING OFFICER

*R C King*

DIRECTOR

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 - 01/11



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

ADULT RESIDENTIAL LICENSING

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

JUN 14 2012

Mr. Craig Cordell, Executive Director  
New Visions of South Central PA, Inc.  
152 South Second Street  
Chambersburg, Pennsylvania 17201

RE: New Visions, Inc.  
103 Deerview Drive  
Newville, Pennsylvania 17241

Dear Mr. Cordell:

As a result of the Department of Public Welfare's licensing inspection on May 4, 2012, we have found the above personal care home to be in compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes). Therefore, a regular license is being issued. Your license is enclosed.

Sincerely,

A handwritten signature in black ink, appearing to read "Ronald Melusky".

Ronald Melusky  
Director

Enclosure  
License



Violation Report: 32870 - 05/04/2012 - Gensil, Lori  
PCH Name: NEW VISIONS INC

1. REGULATION 55 Pa.Code §2600

2600.25(b) - The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

2. DESCRIPTION OF VIOLATION

The contract dated 11/11/11 for resident #1 was not signed by the payer.

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.

On 5.7.12 resident #1's payee was notified that he needed to sign resident's contract. Payee refused to sign. Since Maranatha is taking over as resident's payee a representative signed the contract on 5.24.12.

In the future, administrator will require signatures of payee on contract upon admission of resident and ensure compliance with same, if applicable.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

Sheila Scott

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

Sheila Scott, Administrator

Date

5.24.12

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

The above plan of correction is approved as of 5-25-12  
(Date)

Verification of Legal Entity Representative Signature 5-25-12  
(Date)

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

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