



CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: December 18, 2013

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 Human Services licensing inspection on October 3, 2013 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

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

Sincerely,

A handwritten signature in cursive script that reads "Gloria Emick".

Gloria Emick
Regional Licensing Administrator

Enclosure(s)

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

PCH Name: NEW VISIONS INC		License Number: 32870
Address: 103 DEERVIEW DRIVE, NEWVILLE, PA 17241		County: Cumberland
Administrator: Sheila Scott		Region: CENTRAL
Legal Entity Name: NEW VISIONS OF SOUTH CENTRAL PA INC		
Legal Entity Address: 152 SOUTH SECOND STREET, CHAMBERSBURG, PA 17201		
Certificate(s) of Occupancy R-4 11/08/2012 Upper Frankford Township		
Staffing Hours		
Resident Support: NM	Total Daily Staff: 3	Waking Staff: 2
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for inspection(s) Complaint		
On-Site Inspections Dates and Department Representatives On-Site 10/03/2013: McCloskey, Jason; Riel, Becky		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details Partial or Full Triggers: _____ Random Indicators: _____		
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 4 Number of Residents Served: 3 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: 0 Number of Hospice Residents in past year: 0	Number of Residents who: Receive Supplemental Security Income: 1 Are 60 Years of Age or Older: 1 Have Mental Illness: 3 Have an Intellectual Disability: 0 Have a Mobility Need: 0 Have a Physical Disability: 0	

Violation Report: 32870 - 10/03/2013 - McCloskey, Jason
PCH Name: NEW VISIONS INC

1. REGULATION 55 Pa.Code §2600

2600.23(a) - A home shall provide each resident with assistance with activities of daily living as indicated in the resident's assessment and support plan.

2a. DESCRIPTION OF VIOLATION

The assessment and support plan for Resident #1, dated 6/17/13, indicates that the resident requires assistance with coping with agitation and aggression, Resident #1 engaged in frequent crying and screaming episodes. The home had not implemented positive interventions or provided emotional support to the resident, as outlined in the support plan.

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.

see attached - page 2A of 6 - SE

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* Date *12.5.13*

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

The above plan of correction is approved as of 12-18-13
(Date)

Plan of correction implementation status as of 12-18-13
(Date)

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

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

Page 2A of 6

Plan of Corrections:

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Violation Report: 32870

1. Regulation: 2600.23 (a)

10/9/13 The director has met with all staff and reviewed the need for a more positive approach to individuals. It was discussed options that can be done when a resident is expressing difficult behaviors. For example: taking a step back to assess the situation, asking for assistance when on shift and the resident is exceptionally difficult. The director will incorporate a training that will review options for staff to provide emotional support to a resident with exceptional behaviors such as utilizing more than one staff on at a time, reviewing the support plan for interests that will redirect a difficult behavior. Support plans will be reviewed monthly at routine staff meetings and more frequently with specific staff as indicated by resident complaints or concerns and/or review of resident charts. An annual training for direct care staff will be held to enhance or foster staff ability to utilize positive reinforcement and redirection strategies in support of residents.

12/31/13

2. 2600.42(c)

10/9/13 The director has met with all staff and reviewed the need for all residents to be treated with dignity and respect. All documentation was reviewed with all staff members to discuss what is considered disrespectful and undignified documentation and treatment. Documentation was discussed and ways in which to appropriately document events. Recovery documentation was reviewed with all staff. Dignity was explained to all staff and ways in which to ensure dignity is protected within the program was discussed and situations were discussed and examples were given. The director met individually with staff person A and B. Staff person A and B will immediately complete on line DPW direct care staff trainings. Administrator will review charts daily to ensure no further incidents occur and or discuss any concerns brought to attention by residents at the weekly house meetings. A complaint box is located in the common areas of the program and will be checked daily for any individual complaints.

12/4/13 +
12/5/13

3. 2600.81 (a)

12/4/13 Review with staff person B assessment and support plan and then not less than once at monthly meetings with entire staff. Staff person B will immediately complete DPW training. Review policy and procedures of program to ensure needs of each person is being met. Administrator will check charts weekly and disciplinary will be taken as needed for poor staff performance. Residential Director will review charts quarterly to ensure compliance with program policy, procedures and regulations. Disciplinary action including suspension without pay will be used until additional trainings is provided pending any further complaints. Staff will ensure that all accommodations and equipment is taken to ensure the safety of all residents when transporting.

Debra Beath
12.5.13

Violation Report: 32870 - 10/03/2013 - McCloskey, Jason
PCH Name: NEW VISIONS INC

1. REGULATION 55 Pa.Code §2600
2600.42(c) - A resident shall be treated with dignity and respect.

2a. DESCRIPTION OF VIOLATION

Resident #1's record on the following dates state that the resident was treated in an undignified and disrespectful manner.

On 8/25/13, Staff Person A wrote that Resident #1, "would have plenty of sleep if he/she wouldn't have sat in the bathroom for 3 hrs this morning crying and sobbing so loud that everyone could hear him/her."

On 8/27/13, Staff Person A wrote that, "Staff also reminded him/her [Resident #1] that he/she [Resident #1] was aggitating him/her [another resident] earlier and now it must be his/her [the other resident's] turn to aggitate him/her [Resident #1]."

On 8/29/13, Staff Person B wrote that Resident #1, "c/o (complained of) diarrhea -- none seen by staff. Resident told staff he/she should stay at the PCH due to his/her diarrhea. Staff told him/her the next time he/she went to the bathroom, staff wanted to see it."

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Violation Report: 32870 - 10/03/2013 - McCloskey, Jason
PCH Name: NEW VISIONS INC

1. REGULATION 55 Pa.Code §2600

2600.81(a) - The home shall provide or arrange for physical site accommodations and equipment necessary to meet the health and safety needs of a resident with a disability and to allow safe movement within the home and exiting from the home.

2a. DESCRIPTION OF VIOLATION

On 6/3/13, Resident #1 requested that his/her walker be taken in the van during an outing. Staff Person B refused to take the walker. The need for the walker is documented in the resident's assessment and support plan.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

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RECEIVED TIME - DEC. 5. - 1:50PM

Violation Report: 32870 - 10/03/2013 - McCloskey, Jason
PCH Name: NEW VISIONS INC

1. REGULATION 55 Pa.Code §2600

2600.183(a)(1) - Prescription medications, OTC medications and CAM shall be kept in their original labeled containers and may not be removed more than 2 hours in advance of the scheduled administration.

2a. DESCRIPTION OF VIOLATION

Resident #1 was given a portion of his/her medications (hour of sleep and morning doses) cut out of blister packaging at 12:30 am on 9/26/2013. The morning doses of the medications were for the following morning.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

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Use attached - Page 5 A of 6. -SE

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Page 5A of 6

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4. 2600.183 (a) (1)

Review of medication policy and regulations with all staff. Any further incidences of this nature will result in all medications being given upon residents leaving the site. Due to concerns for safety, it was decided by the residential director to only give a limited supply of medications to the resident upon [redacted] decision to leave the SCR at 12:30 AM. [redacted] had no plans for housing for the evening, [redacted] had no idea where [redacted] was going and [redacted] was making decisions that were felt to be detrimental to [redacted] safety and well being. It was a decision that was not made lightly and was made with the safety of the resident as a primary concern. Staff on site as well as the administrative staff have reviewed the policy and regulations and will in the future follow the regulations as written.

5. 2600.252

Resident 1 did have a photo in [redacted] chart prior to closing out [redacted] chart once [redacted] left the SCR. The Administrator did tear the photo in pieces once [redacted] closed the chart not understanding that the photo was a part of the permanent chart and needed to be kept with the chart. All photos will be kept with the permanent chart until at least 7 years has past once discharged from the program. We have included in the check list of items needed to enter the program a photo and thus it will be kept in closed chart as well.

Should
be
12.5.13

Violation Report: 32870 - 10/03/2013 - McCloskey, Jason
PCH Name: NEW VISIONS INC

1. REGULATION 55 Pa.Code §2600
2600.252 - Each resident's record must include the following information: (1) through (26)

2a. DESCRIPTION OF VIOLATION
The home's record for Resident #1 does not include a photograph.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
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