

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to MECHANICSBURG SENIOR CARE LLC
LEGAL ENTITY

To operate VIBRA SENIOR LIVING
NAME OF FACILITY OR AGENCY

Located at 707 SHEPHARDSTOWN ROAD, MECHANICSBURG, PA 17055
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

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 46
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 10

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 December 30, 2013 until June 30, 2014,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 331091

Robert E. Robinson
ISSUING OFFICER


ACTING 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.



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

DEC 27 2013

Ms. Michael Beaver, President
Mechanicsburg Senior Care, LLC
4550 Lena Drive, Suite 225
Mechanicsburg, Pennsylvania 17055

RE: Vibra Senior Living
707 Shephardstown Road
Mechanicsburg, Pennsylvania 17055

Dear Mr. Beaver:

As a result of the Department of Public Welfare's licensing inspection on December 17, 2013, 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 (related to Personal Care Homes), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because the home is new and not yet serving four or more residents.

In accordance with 55 Pa.Code § 2600.11(b) (relating to procedural requirements for licensure or approval of personal care homes) a re-inspection of your newly licensed facility will be conducted within 3 months of the effective date of this license. Complete compliance with all applicable regulations is required in order to maintain your license.

During the inspection, violations on the enclosed Licensing Inspection Summary were found. All violations specified on the Licensing Inspection Summary must be corrected by the dates specified on the Licensing Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Your PROVISIONAL license is enclosed, based on substantial but not complete complete compliance with 55 Pa.Code Ch. 2600.

Sincerely,

Matthew J. Jones
Acting Director

Enclosures
License
Licensing Inspection Summary

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

PCH Name: Vibra Senior Living		License Number:
Address: 707 Shepherdstown Road, Mechanicsburg, PA 17055		County: Cumberland
Administrator: Charlene Cuddy		Region: CENTRAL
Legal Entity Name: Mechanicsburg Senior Care, LLC		
Legal Entity Address: 4550 Lena Drive, Suite 225, Mechanicsburg, PA 17055		
Certificate(s) of Occupancy I-2 12/12/2013 Upper Allen Twp		
Staffing Hours		
Resident Support:	Total Daily Staff:	Waking Staff:
Type of Inspection: Initial	BHA Docket Number:	Notice: Announced
Reason(s) for Inspection(s) New		
On-Site Inspections Dates and Department Representatives On-Site 12/17/2013; Loudenslager, Lynn; O'Pake, Hope		
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:	Number of Residents who:	
Number of Residents Served:	Receive Supplemental Security Income:	
Secured Dementia Care Unit in Home: Yes	Are 60 Years of Age or Older:	
Area:	Have Mental Illness:	
Secured Dementia Unit Capacity, if Applicable:	Have an Intellectual Disability:	
Number of Residents Served in Secured Dementia Care Unit, if applicable:	Have a Mobility Need:	
Number of Current Hospice Residents:	Have a Physical Disability:	
Number of Hospice Residents in past year:		

Violation Report: - 12/17/2013 - Loudenslager, Lynn
 PCH Name: Vibra Senior Living

1. REGULATION 55 Pa.Code §2600
 2800.93(b) - Each porch must have a well-secured railing.

2a. DESCRIPTION OF VIOLATION

There are porches at the ends of the 500 and 600 hallways in the personal care home section. There are egress paths leading from both porches on the right. The other two sides of both porches have drop offs that require a secured railing.

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.

- Maintain safety for residents & reduce risk of falls.
- Currently no railings were completed with new construction.
- Secured railings will be placed on porches at the ends of 500 & 600 hallway. Railings will be constructed to correct situation on two sides of both porches with drop offs. To be completed by 12-27-13.
- administrator/maintenance Director will maintain compliance of Reg. 93 B.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Diane Anderson</i>	Date <i>12-19-13</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 12/20/13
 (Date)

Plan of correction implementation status as of 12/23/13
 (Date)

The above plan of correction was approved by *[Signature]*
 (Initials)

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

Violation Report - 12/17/2013 - Loudenslager, Lynn
 PCH Name: Vibra Senior Living

1. REGULATION 55 Pa. Code §2600
 2600.100(a) - The exterior of the building and the building grounds or yard must be in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

There are porches at the ends of the 500 and 600 hallways in the personal care home section. There are egress paths leading from both porches on the right. The egress paths are not safe for walking and cause a hazard for a resident using the path to exit the building from the doors in those hallways.

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.

- To ensure egress paths are safe for walking.
- Paths were not installed during construction.
- Construction Co. was notified of assessed situation. Due to weather sidewalks cannot be installed until spring.
- Pavers will be installed to ensure safety. Pavers will be temporary & to be completed by 1-15-14.
- Administrator/Maintenance Director will maintain adherence compliance of Reg. 107A.

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page) *Diane Anderson*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Diane Anderson* Date *12-19-13*

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Violation Report - 12/17/2013 - Loudenslager, Lynn
 PCH Name: Vibra Senior Living

1. REGULATION 55 Pa.Code §2600

2600.107(a) - The administrator shall have a copy and be familiar with the emergency preparedness plan for the municipality in which the home is located.

2a. DESCRIPTION OF VIOLATION

The home does not have a copy and is not familiar with the emergency preparedness plan for the local township or the county.

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.

- In the event of an emergency Facility will be familiar with local Emergency Management Plans.
- Facility did not have plan available.
- ██████████ - Cumberland County EMA was contacted. Message was left & awaiting return call.
- Administrator/Resignee will ensure compliance of Reg. 107-A.
- To be completed by 1-8-14.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Miane Anderson

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

D, ANE ANDERSON

Date

12-19-13

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DA
 (Initials)

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Violation Report: - 12/17/2013 - Loudenslager, Lynn
 PCH Name: Vibra Senior Living

1. REGULATION 55 Pa.Code §2600
 2600.123(a) - Exit doors must be equipped so that they can be easily opened by residents from the inside without the use of a key or other manual device that can be removed, misplaced or lost.

2a. DESCRIPTION OF VIOLATION
 The door in the activity multi-purpose room leading to the outside is equipped with a key-locking device.

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.

- In the event of a fire or other emergency residents will be able to exit building.
- Door in multi-purpose room was not utilized as an exit → door was locked.
- Door in multi-purpose room was changed so that door can be opened without the use of a key or other manual device that can be lost.
- Construction was completed on door 12-19-13. (Personal care → multi purpose room)

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page) *Diane Anderson*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) **DIANE ANDERSON** Date **12-19-13**

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Plan of correction implementation status as of 12/23/13
 (Date)

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 (Initials)

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Violation Report: - 12/17/2013 - Loudenslager, Lynn
 PCH Name: Vibra Senior Living

1. REGULATION 55 Pa.Code §2600

2600.133(a)(2) - If the home serves nine or more residents, if the exit or way to reach the exit is not immediately visible, access to exits shall be marked with readily visible signs indicating the direction to travel.

2a. DESCRIPTION OF VIOLATION

The main hallway of the home has four separate hallways that lead to an exit. There are no signs marking the line of travel to each exit.

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.

- To guide residents to exit paths in the event of a fire or emergency.
- Exit signs were not visible indicating direction to travel.
- Exit signs will be placed in appropriate hallway to guide residents to an exit.
- Maintenance Director will be responsible to complete & monitor compliance of Reg. 133(A)(2). To be completed by 12-20-13.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Diane Anderson

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

DIANE ANDERSON

Date 12-19-13

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Violation Report: - 12/17/2013 - Loudenstager, Lynn
 PCH Name: Vibra Senior Living

1. REGULATION 55 Pa.Code §2600
 2600.233(d) - Doors that open onto areas such as parking lots, or other potentially unsafe areas, shall be locked by an electronic or magnetic system.

2a. DESCRIPTION OF VIOLATION

The exit door in the rear of the secured dementia care unit, near room 706, opens into a outside grass area that leads to a driveway. This door is not locked with an electronic or magnetic locking system.

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.

- To ensure safety of residents who are not able to make decisions about their own safety.
- Door in secured dementia unit was not locked.
- Improper door installed.
- New keypad secured door was installed today - 12-19-13.
- Administrative/Maintenance Director will be responsible to maintain compliance of Reg. 233 (d).

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Diane Anderson

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

DIANE ANDERSON

Date 12-19-13

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