



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: April 2, 2015

Ms. Jolynn Carl, Administrator
Pleasant View Retirement Community
544 North Penryn Road
Manheim, Pennsylvania 17545

RE: Pleasant View Retirement Community
Certificate # 321850

Dear Ms. Carl:

As a result of the Department of Human Services' licensing inspection on February 27, 2015 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.

Sincerely,

Cybil Bomberger
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

Violation Report: 32185 - 02/27/2015 - Hoover, Douglas
 PCH Name: PLEASANT VIEW RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600

2600.21- If services or activities are provided by the home at a location other than the premises, the home shall ensure that the residents' support plans are followed and that resident health and safety needs are met.

2a. DESCRIPTION OF VIOLATION

The health and safety needs of resident #1, as documented on the 8/15/14 support plan, were not met on 2/10/15 during transportation for a medical appointment. Resident #1, who has mobility needs and requires assistance during transfers, was partially ejected from his/her motorized chair when the vehicle came to an abrupt stop and was unable to get back into position. The driver, who was the only other occupant of the vehicle, was unable to assist the resident by herself and called 911 for assistance with the resident lying on the floor of the vehicle. As a result of the incident, the resident's left leg was broken.

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 TYPED Plan Attached - PAGES 2-A + 2-B

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Jolynn Carl, Jolynn Carl, Administrator

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

Jolynn Carl, Jolynn Carl

Date

3-18-15

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

The above plan of correction is approved as of

4/1/15
 (Date)

Plan of correction implementation status as of

4/1/15
 (Date)

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

The above plan of correction was approved by

CB
 (Initials)

PLAN OF CORRECTION DETAIL:

Pleasant View Retirement Community

2600.21: If services or activities are provided by the home at a location other than the premises, the home shall ensure that the residents' support plans are followed and that resident health and safety needs are met.

Description of Violation: The health and safety needs of resident, as documented on the 8/15/14 support plan, were not met on 2/10/15 during transportation for a medical appointment. Resident, who has mobility needs and requires assistance during transfers, was partially ejected from her motorized chair when the vehicle came to an abrupt stop and was unable to get back into position. The driver, who was the only other occupant of the vehicle, was unable to assist the resident by herself and called 911 for assistance with the resident lying on the floor of the vehicle. As a result of the incident, the resident's leg was broken.

1). What specific change will be made:

- At the time transport is needed, the Support Plan will be reviewed by the Charge Nurse to determine mobility needs prior to the resident leaving the building.
- If the transport is coordinated with Care at Home OR Pleasant View Transport, the charge nurse will determine, based on the Support Plan, if additional staff support is required.
- If additional staff support is required, the Charge Nurse will communicate by email to the Personal Care Scheduler to arrange for the additional staff support to accommodate the mobility needs as necessary.
- The Scheduler will communicate by email to the Administrator and Director of Residential Services

2). Who will make the change:

- The Administrator will initiate the change.

3). When will the change be made:

- The change is immediate.
- All involved staff will be notified of the change on or before March 27, 2015

4). How will the change be made:

- If the support plan requires assistance with transfers or other mobility needs, an additional staff person will be scheduled to assist the Pleasant View driver.

Jolynn Carl
Jolynn Carl -
Administrator

3-18-15

(CB)

5). What system have you implemented to make sure that the same violation will not occur again:

- All transports by Pleasant View Staff are reported to Administrator and Director of Residential Services to double check the support plan is being followed for mobility needs as necessary.

6). What training will be provided to staff:

- Attached is a communication memo to be signed by all staff after reading policy statement
- Email to follow up with directives
- Inservices to follow to reinforce importance of following support plan

Sabynn Carl, Administrator
Suzanne Carl

3/18/15
@

Violation Report: 32185 - 02/27/2015 - Hoover, Douglas
 PCH Name: PLEASANT VIEW RETIREMENT COMMUNITY

1. REGULATION 55 Pa.Code §2600

2600:171(b)(4) - If staff persons or volunteers of the home provide transportation for the residents, at least one staff member transporting or accompanying the residents shall have completed the initial new hire direct care staff person training as specified in § 2600.65 (relating to direct care staff person training and orientation).

2a. DESCRIPTION OF VIOLATION

Staff member A, who transported resident #1 on 2/10/15, did not have the new hire direct care staff person training.

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 TYPED Plan Attached - PAGES 3-A
 +
 3-B

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Jolynn Carl, Administrator* Date *3-18-15*

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

The above plan of correction is approved as of <u>4/1/15</u> (Date)	Plan of correction implementation status as of <u>4/1/15</u> (Date)
The above plan of correction was approved by <u>CB</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

PLAN OF CORRECTION DETAIL:

Pleasant View Retirement Community

2600.171(b) (4)– If staff persons or volunteers of the home provide transportation for the residents, at least one staff member transporting or accompanying the residents shall have completed the initial new hire direct care staff person training as specified in 2600.65 (relating to direct care staff person training and orientation).

Description of Violation: Staff Member, who transported resident on 2/10/15, did not have the new hire direct care staff person training.

1). What specific change will be made:

- The Care at Home employee, [REDACTED] is not be permitted to transport Personal Care Residents until she has completed the required training as outlined in 2600.65..
- Target date for completion is April 30, 2015.

2). Who will make the change:

- The Administrator has initiated the change.
- The Director of Care at Home Staff is assisting in implementing training change.
- The employee, [REDACTED] is completing the training in order to be compliant with the regulation.

3). When will the change be made:

- Staff member, [REDACTED] is completing the required training as outlined in 2600.65 – target date for completion is April 30, 2015.
- All Care at Home transports are being suspended until all training records have been reviewed for completeness.
- The change is immediate.

4). How will the change be made:

- After completion of the training, it will be verified, after verification, the employee will be able to resume her driver duties within Care at Home.

5). What system have you implemented to make sure that the same violation will not occur again:

- Audits will be conducted quarterly through our Personal Care QA process to specifically review 2600.65. Responsible persons: Administrator or Director of Residential Services.
- The results of the audits will be included in the QA minutes.

PKF 3B

6). What training will be provided to staff:

- All Terrace Gardens and Care at Home Staff will be notified through a communication memo what training requirements are necessary to perform transport duties for Personal Care Residents.
- The Communications Memo will be signed and dated and a copy will be kept in a prominent location within the respective areas.
- Training program is located on Pleasant View's RELIAS mandatory training program along with one-on one- training that is not covered within RELIAS, the one on one training is provided by the Administrator or the Director of Residential Services.