



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail [REDACTED]
November 14, 2018

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
November 14, 2018

Mr. Dennis H. Roberts
Chief Program Officer
Resources for Human Development, Inc.
Attn: Jesse Padgett
4700 Wissahickon Avenue, Suite 126
Philadelphia, Pennsylvania 19144

RE: New Options I
1419-21 Powell Street
Norristown, Pennsylvania 19401
License #: 128040

Dear Mr. Roberts:

As a result of the Department's Bureau of Human Services Licensing inspection on May 16, 2018 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,

A handwritten signature in cursive script that reads "Patricia Adams".

Patricia Adams
Regional Licensing Director

Enclosure
Licensing Inspection Summary

Violation Report: 12804 - 05/18/2018 - Gray, Dean
 PCH Name: NEW OPTIONS I

1. REGULATION 55 Pa.Code §2600
 2600.85(d) - Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

2a. DESCRIPTION OF VIOLATION
 The trash can in the upstairs bathroom on the 1421 side of the building does not have a lid:

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.

POC: Covered trash can was immediately placed in the upstairs bathroom. Currently all trashcans in bathrooms and in the kitchen are covered.

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Linda Donovan-Magdeno*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Linda Donovan-Magdeno* Date *10/10/18*

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

The above plan of correction is approved as of <u>10/11/18</u> (Date)	Plan of correction implementation status as of <u>11/8/18</u> (Date)
The above plan of correction was approved by <i>[Signature]</i> (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

Violation Report: 12804 - 05/18/2018 - Gray, Dean
PGH Name: NEW OPTIONS I

1. REGULATION 55 Pa.Code §2800
2800.88(a) - Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

The upstairs bathroom on the 1419 side of the building had 2 unsecured wires running across the floor between the toilet and the wall presenting a tripping hazard.

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.

POC: While inspector was present, our building maintenance person secured the wires to the wall and we were notified on the spot that it was an acceptable repair and no longer presented a hazard.

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

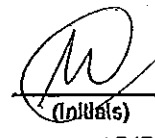
Signature of Legal Entity Representative (Required on EVERY Page) *Linda Donovan*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Linda Donovan - Magdano* Date *10/10/18*

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(Date)

Plan of correction implementation status as of 11/8/18
(Date)

The above plan of correction was approved by 
(Initials)

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Violation Report: 12804 - 05/16/2018 - Gray, Dean
 PCH Name: NEW OPTIONS I

1. REGULATION 65 Pa.Code §2600
 2600.141(a)(2) - The medical evaluation must include the following: (1) through (10)

2a. DESCRIPTION OF VIOLATION

- The medical evaluation for resident #1, dated 03/22/17, does not include page 2.
- The medical evaluation for resident #2, dated 01/23/18, does not include type of evaluation or the completion of sections 3, 4, 7, 8 and is missing a medication addendum.
- The medical evaluation for resident #3, dated 01/31/18, did not have sections 3, 4, and 8 completed and the medication addendum is not attached.
- The medical evaluation for resident #4, did not have the evaluation information completed (no date available), sections 3, 4, 5, 7 and 8 are blank and there is no 2nd page available.

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.

POC: Inspector suggested that our medical staff complete portions of the DME prior to appointment and then ask the physician to add, review and sign so that they are completed thoroughly. Medical staff have been instructed to complete DME portions moving forward, and will discuss the need for thoroughness with physician as needed.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Linda Dorrovan-Magdamo, EMD</i>	Date <i>10/10/18</i>
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Violation Report: 12804 - 05/16/2018 - Gray, Dean
 PCH Name: NEW OPTIONS I

1. REGULATION 55 Pa.Code §2800
 2800.141(b)(1) - A resident shall have a medical evaluation at least annually.

2a. DESCRIPTION OF VIOLATION
 Resident #4's last completed medical evaluation was dated 04/18/17. Another evaluation was started but the form is not complete and is not dated.

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.

POC: Will review to make sure all documentation has been filed in a timely fashion, as this medical evaluation had been completed but was not in place at the time of the inspection.

Repeat Violation: Yes	Date(s) of Previous Violation(s):	07/08/2017
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Linda Donovan Magdona*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Linda Donovan - Magdona, EVP* Date *10/10/18*

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Violation Report: 12804 - 05/16/2018 - Gray, Dean

PCH Name: NEW OPTIONS I

1. REGULATION 55 Pa.Code §2600

2600.227(d) - Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services.

2a. DESCRIPTION OF VIOLATION

- The assessment for resident #1 indicates the resident has a need for Supervision, Medications and a diagnosis of Vertigo. The resident's support plan does not document how this need will be met.
- The assessment for resident #2 indicates the resident has a need for Supervision and Medications. The resident's support plan does not document how this need will be met.

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.

- Resident #1 and #2's support plan was updated to address the resident's needs.

- Resident support plans will be reviewed and updated as necessary to address resident needs. The audits will be maintained for department review. Staff will be trained on the importance of the support plan and meet resident needs.

approved POC (W) 11/13/18

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Linda Donovan Magdano

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


Linda Donovan - Magdano, EVP

Date 10/10/18

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