



pennsylvania
DEPARTMENT OF HUMAN SERVICES

FEB 1 1 2019

Mr. Vincent J. Romanini
President
Rural Living, Inc.
220 Regent Court, Suite, E-1
State College, Pennsylvania 16801

RE: Wynwood House at Nittany Valley
294 Discovery Drive
Boalsburg, Pennsylvania 16827
License #: 232620

Dear Mr. Romanini:

As a result of the Department's Bureau of Human Services Licensing annual inspection on December 20, 2018 of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
Violation Report

Violation Report: 23262 - 12/20/2018 - Harvey, Jason
 PCH Name: WYNWOOD HOUSE AT NITTANY VALLEY

1. REGULATION 55 Pa.Code §2600
 2600.132(f) - Alternate exit routes shall be used during fire drills.

2a. DESCRIPTION OF VIOLATION
 The home's fire drill record indicates the home is not alternating exit routes during monthly fire drills. The home fire drill log indicates the home used the front and rear exits during monthly fire drills on the following dates:
 7/12/19, 8/9/18, and 9/13/18.

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.

REGULATION 2600.132(f)

Compliance with this regulation ensures that staff and residents are prepared to respond to different fire scenarios.

This regulation was violated when it was determined that the same front and rear exits were utilized during the facility fire drills dated 07/12/2018, 8/09/2018, and 09/13/2018.


The violation was corrected immediately by re-educating the designees responsible for running and recording fire drills. Re-education included the necessity to alternate exit routes for each fire drill.

Future violations will be prevented by re-educating current staff and providing education to new staff who are responsible for running and recording fire drills. The education will include the necessity to utilize alternate exit routes for each fire drill.

Compliance to be monitored by Administrator.

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



Printed Name and Title of Legal Entity Representative (Required on EVERY Page) VINCENT ROMANINI, OWNER	Date 1/23/19
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>1-30-19</u> (Date)	Plan of correction implementation status as of <u>1-30-19</u> (Date) <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
The above plan of correction was approved by <u>AR</u> (Initials)	

Violation Report: 23262 - 12/20/2018 - Harvey, Jason
 PCH Name: WYNWOOD HOUSE AT NITTANY VALLEY

1. REGULATION 55 Pa.Code §2600
 2600.184(b) - If the OTC medications and CAM belong to the resident, they shall be identified with the resident's name.

2a. DESCRIPTION OF VIOLATION
 Resident #1's Equate Aspirin located in the medication cart was not labeled with resident's name.

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.

REGULATION 2600.184(b)

Compliance with this regulation ensures that it is clear to the facility staff persons as to whom all OTC medication belongs.

This regulation was violated when it was determined that a bottle of Equate Aspirin was located on the medication cart and was not labeled with a resident name.

This regulation was corrected immediately by labeling the medication appropriately.

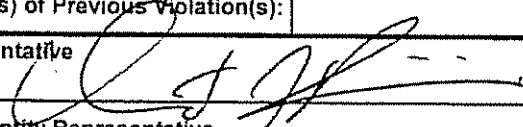
Future violations will be prevented by educating all staff of the requirement to have OTC medications labeled with the resident name appropriately. In addition, facility nurses will audit medication carts at least monthly to ensure compliance with this regulation.

Compliance to be monitored by Administrator.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)



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

VINCENT ROMANINI, OWNER

Date

1/23/19

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Plan of correction implementation status as of 1-30-19
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- Fully Implemented
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- Partially Implemented - Inadequate Progress
- Not Implemented

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