



pennsylvania
DEPARTMENT OF HUMAN SERVICES

August 28, 2019

Mr. Craig Cordell
Executive Director
Visions of South Central PA, Inc.
152 South Second Street
Chambersburg, Pennsylvania 17201

RE: New Visions Inc.
103 Deerview Drive
Newville, Pennsylvania 17241
Certificate #: 328700

Dear Mr. Cordell:

As a result of the Department's Bureau of Human Services Licensing annual inspection on April 9, 2019 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 "Kevin Hancock".

Kevin Hancock
Deputy Secretary
Office of Long-term Living

Enclosure
Violation Report

Violation Report: 32870 - 04/09/2019 - Cargile, Kellie

PCH Name: NEW VISIONS INC

1. REGULATION 55 Pa.Code §2600

2600.95 - Furniture and equipment must be in good repair, clean and free of hazards.

2a. DESCRIPTION OF VIOLATION

The bathroom in the basement of the home that is accessible to both residents and staff, has a toilet safety rail that is coated with rust on the exposed bar under the toilet seat.

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.

At the time of the inspection, new toilet safety rails had been ordered for all four bathrooms. The new safety rails were delivered and installed by maintenance by 4/12/19. The new safety rails don't have a bar that sits under the toilet seat that will become rusted. PCH staff checks furniture and equipment daily for needed repairs and reports them to administrator for maintenance to be notified.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Megan B. Richard

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

Megan B. Richard, BA

Date 5/29/19

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

The above plan of correction is approved as of 8/13/19
(Date)

Plan of correction implementation status as of 8/13/19
(Date)

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

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

Violation Report: 32870 - 04/09/2019 - Cargile, Kellie

PCH Name: NEW VISIONS INC

1. REGULATION 55 Pa.Code §2600

2600.105(g)(1) - To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.

2a. DESCRIPTION OF VIOLATION

On 4/9/19, there was an accumulation of lint in the lint trap of the Whirlpool dryer in the home's basement.

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.

All staff was reeducated immediately on 4/9/19 via a written memo, to clean lint traps in dryer after each use. Signs are already posted by the dryers. Administrator updated the lint trap logs that are to be signed by staff doing laundry, to include a check box to mark when traps are cleaned. The dryers were numbered for easier identification.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Megan G. Richard, BA

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

Megan G. Richard, BA

Date 5/29/19

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Violation Report: 32870 - 04/09/2019 - Cargile, Kellie

PCH Name: NEW VISIONS INC

1. REGULATION 55 Pa.Code §2600

2600.187(b) - The information in § 2600.187(a)(13) and § 2600.187(a)(14) shall be recorded at the time the medication is administered.

2a. DESCRIPTION OF VIOLATION

On 4/2/19 and 4/9/19 at 8 am, Resident #1's Loprox .77% gel was administered. These administrations were not initialed by the staff member on the Medication Administration Record at the time of the administration.

On 4/9/19 at 8 pm, Resident #2's Aripiprazole 30 mg was administered. This administration was not initialed by the staff member on the Medication Administration Record at the time of administration.

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.

Staff was re-educated via a written memo on 4/9/19 about proper medication administration documentation procedures. Staff members will double-check their documentation in the MAR after every medication administration. It was determined at the time of inspection that Resident #2's Aripiprazole was given, just not documented at the time of administration. This was corrected in the MAR.

The Administrator or designee will complete a monthly audit of the MARs to identify medication errors. Training of staff persons regarding missing information will be conducted. The medication audits will be included in the home's periodic quality management reviews. -GE, 8/13/19

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
(Required on EVERY Page) *Megan C. Richard, BA*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Megan C. Richard, BA* Date *5/29/19*

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