



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

AUG 04 2014

Ms. Gina Fusco, CEO
UHS of Doylestown, LLC
833 East Butler Avenue
Doylestown, Pennsylvania 18901

RE: Foundations Behavioral Health – Bldg. 16 Perseverance Hall
License # 130170

Dear Ms. Fusco:

As a result of the Department of Public Welfare's licensing inspection on June 4, 2014 and June 5, 2014, of the above facility, the violations with 55 Pa.Code Ch. 3800 (relating to Child Residential and Day Treatment Facilities) 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. 3800 must be maintained.

Your regular license for the period July 20, 2014 to July 20, 2015 was issued on April 10, 2014. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink that reads "Matthew J. Jones/BK".

Matthew J. Jones
Director

Enclosure
License Inspection Summary

**VIOLATION REPORT
CHILD RESIDENTIAL LICENSING - 55 Pa.Code Chapter 3800**

Facility Name: FOUNDATIONS BEHAVIORAL HEALTH BLDG 16 PERSERVERENCE HALL		License Number: 13017
Address: 833 EAST BUTLER AVENUE, DOYLESTOWN, PA 18901		County: Bucks
Director: Gina Fusco		Region: SOUTHEAST
Legal Entity Name: UHS OF DOYLESTOWN LLC		
Legal Entity Address: 833 EAST BUTLER AVENUE, DOYLESTOWN, PA 18901		
Certificate(s) of Occupancy R-4 07/20/2007 Borough of New Britain		
Program Type: Residential Services	Licensed Capacity: 14	Number of Children Served: 12
Type of Inspection: Full	BHA Docket Number:	Notice: Announced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 06/04/2014: ; Brice, Joseph; Santiago, Kanika; <i>Darius, Michael</i> 06/05/2014: ; Brice, Joseph; <i>Darius, Michael</i>		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Child Demographic Data as of Inspection Dates		
Age of Children: 0 to 5 years: 0 6 to 13 years: 0 14 to 17 years: 5 18 to 21 years: 7	Number of Children who: Are Adjudicated Delinquent: 0 Are Dependent: 0 Have Mental Illness: 12 Have an Intellectual Disability: 0 Have a Physical Disability: 0	

Licensing Inspection Summary: 13017 - 06/04/2014 -
 Facility Name: Perseverance Hall

1. REGULATION 55 Pa.Code §3800
 3800.31(c) - A copy of the child's rights, the grievance procedures, and applicable consent to treatment protections shall be posted and given to the child, the child's parent and, if applicable, the child's guardian or custodian, upon admission.

2a. DESCRIPTION OF VIOLATION
 A copy of the child's rights was not posted in the facility.

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.

Please see attached.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Abigail Hillman Dir of PA</i>	Date <i>6/20/14</i>
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DEPARTMENT USE ONLY - FACILITIES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 7/7/14
 (Date)

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

Plan of correction implementation status as of 7/7/14
 (Date)

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

Unit : 16 Perseverance Hall

License #: 13017

Regulation : 3800.31 (c) A copy of the child's rights, the grievance procedures, and applicable consent to treatment protections shall be posted and given to the child, the child's parent and, if applicable, the child's guardian or custodian, upon admission. A copy of the child's rights was not posted in the facility.

What specific changes will be made:

Required rights were posted on the units at the time of the survey. In addition, the 3800 rights will be posted in the admissions area where each resident and parent come for admission.

Who will make the change:

Assistant Director of RTF posted all required rights on patient units. Director of admissions posted rights in admissions.

When will the change be made:

Rights were posted 6/4/14 on patient units. Rights posted in admissions 6/24/14

How will the change be made:

Rights were posted 6/4/14 on patient units. Rights posted in admissions 6/24/14

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

Monthly unit and admissions office tours will look for presence of rights posted.

What training will be provided to your staff:

Administration in service reminding of requirement to post rights.

Documentation supporting:

Please see attached picture A for rights posted in admissions, B for rights posted on unit and C for in-service sign in.

A. Hill A. Hill A. Hill A. Hill A. Hill 6/30/14

Licensing Inspection Summary: 13017 - 06/04/2014 -
 Facility Name: Perseverance Hall

1. REGULATION 55 Pa.Code §3800
 3800.146(b) - Each child who is 3 years of age or older shall receive a hearing screening within 30 days after admission in accordance with the periodicity schedule recommended by the American Academy of Pediatrics, "Guidelines for Health Supervision."

2a. DESCRIPTION OF VIOLATION
 Child 1's initial hearing screening was dated 1/21/2013, Child 1's annual hearing screening was dated 5/8/2014.

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.

Please see attached.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Angel Halloran D.R.A.</i>	Date <i>6/30/14</i>
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Unit : 16 Perseverance Hall
License #: 13017

Regulation : 3800.146 (b) Each child who is 3 years of age or older shall receive a hearing screening within 30 days after admissions in accordance with the periodicity schedule recommended by the American Academy of Pediatrics, "Guidelines for Health Supervision."

Child 1's initial hearing screening was dated 1/21/2013 and the annual was dated 5/8/14.

What specific changes will be made:

1. Child 1 annual hearing screen completed. Data base established with ticklers for a month prior to annual visit to ensure enough time for appointment.
2. Refusals will be clearly documented and further attempts made.
3. Director of Nursing had staff check all charts to ensure all annual hearing screens completed.

Who will make the change:

1. Assistant Director of Nursing will program Data base for reminders and will review log monthly.
2. Assistant Director of Nursing will document refusals and next appointment made.
3. Director of Nursing coordinated review of charts.

When will the change be made:

1. Data base in effect, reminders programmed 6/25/14.
2. Progress note will be written for every refusal.
3. Charts reviewed by 6/30/14.

How will the change be made:

1. Assistant Director of Nursing will program Data base for reminders and will review log monthly.
2. Assistant Director of Nursing will document refusals and next appointment made.

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

1. Assistant director of nursing will review the Data base monthly to ensure that all scheduled appointments have been completed, or new appointments scheduled.
2. Assistant director of nursing will check for presence of note and new appointment if a child refused.

What training will be provided to your staff:

Administration in serve provided about requirement for initial hearing visit within 30 days and annual screening visit, and ensuring new appointments made if a child refuses.

Documentation supporting:

Please see attached document A, the follow up appointment for the hearings screening, B a copy of the data base and C a copy of the education in service.

A. Hill *Angie Hillman DIR QA 6/30/14*

Licensing Inspection Summary: 13017 - 08/04/2014 -
 Facility Name: Perseverance Hall

1. REGULATION 55 Pa.Code §3800
 3800.151 - A staff person or volunteer who comes into direct contact with the children or who prepares or serves food, shall have a statement signed and dated by a licensed physician, certified registered nurse practitioner or licensed physician's assistant, within 12 months prior to working with children or food service and every 2 years thereafter, stating that the person is free of serious communicable disease that may be spread through casual contact or that the staff person has a serious communicable disease that may be spread through casual contact but is able to work in the facility if specific precautions are taken that will prevent the spread of the disease to children.

2a. DESCRIPTION OF VIOLATION
 Staff member A, hired on 2/12/2008, most recent health exam was signed by an RN.
 Staff member B, hired on 3/28/2002, most recent health exam was signed by an RN.
 Staff member C, hired on 1/16/2014, most recent health exam was signed by an RN.

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.

please see attached

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Angela Holloway OR PA* Date *6/30/14*

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 (Initials)

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 (Date)

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

Unit : 16 Perseverance

License #: 13017

Regulation : 3800.151 A staff person or volunteer who comes into direct contact with the children or who prepared or serves food shall have a statement signed and dated by a licensed physician, CRNP or PA within 12 months prior to working and every 2 years thereafter stating that the person is free of serious communicable diseases that may be spread through casual contact or that if the staff member has a serious communicable disease that may be spread through casual contact but is able to work in the facility if specific precautions are taken that will prevent the spread of disease to children.

A staff member had a health statement signed by an RN.

What specific changes will be made:

1. Current employees seen by MD to screen for communicable diseases. MD signed their forms.
2. New Employee Health Screening form created. It asks employee to note any communicable diseases, and will require an MD sign off.

Who will make the change:

1. Medical Director observed the staff and signed the Health Screen forms.
2. Director of Quality Assurance created new Health Screening form, and Director of Human Resources will education HR staff on proper completion.

When will the change be made:

1. Current employees seen by 6/25/14
2. Health Screening form in effect as of 6/25/14.

How will the change be made:

1. Medical Director observed that staff have no communicable diseases.
2. Additional form created to note communicable diseases and requires MD signature for New Employees and every 2 years.

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

1. Form implemented as part of New Employee Orientation to ensure communicable diseases noted and an MD signs off. Will be updated every 2 years.

What training will be provided to your staff:

HR staff will receive in service noting requirement to have MD sign Health Screening Form

Documentation supporting:

Please refer to attached form A the revised Health Screening form, Form B the In -service sign in and forms C,D, and E, the employee health forms.

A.Hill Aigil Halloran DRDA 6/30/14

Licensing Inspection Summary: 13017 - 06/04/2014 -
 Facility Name: FOUNDATIONS BEHAVIORAL HEALTH BLDG 16 PERSERVERENCE HALL

1. REGULATION 56 Pa.Code §3800
 3800.243 - Each child's record shall include: (1) through (14).

2a. DESCRIPTION OF VIOLATION
 Child 1's record does not include the child's eye color.

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.

please see attached.

Repeat Violation: Yes	Date(s) of Previous Violation(s):	06/10/2013
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Signature of Legal Entity Representative
 (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Abigail Talloran JRBA</i>	Date <i>6/30/14</i>
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Unit : 16 Perseverance

License #: 13017

Regulation : 3800.243 Each child's record shall include : (1) through (4)

Child 1's record does not include child's eye color.

What specific changes will be made:

1. Eye color for Child 1 established and updated on nursing assessment.
2. Regular chart audits of the nursing assessment will be completed to ensure that all questions are answered, including eye color.
3. Eye color was also added to the RTF disposition form to ensure that eye color is captured.

Who will make the change:

1. RTF Nurse established eye color and documented
2. Director of Nursing will review charts on a regular basis to ensure all questions are completed, including eye color.
3. Director of Admissions will review RTF Disposition form to ensure all questions completed including eye color.

When will the change be made:

1. Eye color was noted on 6/6/14.
2. Chart audits have been ongoing as part of the Performance Improvement process, and will be enhanced to specifically look for eye color.
3. RTF Disposition form modified 6/7/14 to include eye color.

How will the change be made:

1. Nurse wrote an addendum on nursing assessment.
2. Review of nursing assessment will review that eye color was documented.
3. RTF disposition form will be reviewed to ensure that eye color was completed.

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

1. Nursing assessments will be reviewed to ensure eye color is completed, and reported as part of PI process.
2. Director of Admissions signs off on RTF Disposition form, and will ensure eye color is captured.

What training will be provided to your staff:

Administrative staff who review forms will receive educational in-service of requirement to complete eye color on both the nursing assessment and the RTF Disposition Form.

Documentation supporting:

Please refer to document A, RTF disposition form that will also capture eye color, and document B , the education in-service and C updated Nursing assessment for this child.

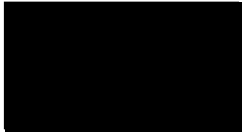
A. Halligan Abigail Halligan DR QA 6/20/14

STAFF PRIVACY CODING DOCUMENT
CHILD RESIDENTIAL LICENSING - 55 Pa. Code Chapter 3800

Facility Name: Perversence Hall	License Number:
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Designation Staff Member's Name

A
B
C



Abigail Halloran MA OA
Printed Name and Title of Legal Entity Representative

A. Halloran
Signature of Legal Entity Representative

6/30/14
Date

Date of Inspection: 06/04/2014

CHILD PRIVACY CODING DOCUMENT
CHILD RESIDENTIAL LICENSING - 55 Pa. Code Chapter 3800

Facility Name: Perseverance Hall	License Number:
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<u>Designation</u>	<u>Child's Name</u>
Resident 1	[REDACTED]

Abigail Halloren DR DA
Printed Name and Title of Legal Entity Representative

A. Halloren
Signature of Legal Entity Representative

6/30/14
Date