

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC

June 3, 2025

[REDACTED], DIRECTOR OF PERSONAL CARE
GARDEN SPOT VILLAGE
433 S. KINZER AVENUE
NEW HOLLAND, PA, 17557

RE: GARDEN SPOT VILLAGE
433 S. KINZER AVENUE
MOUNTAIN VIEW AND LAUREL
VIEW
NEW HOLLAND, PA, 17557
LICENSE/COC#: 32194

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/13/2025, 05/14/2025 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: GARDEN SPOT VILLAGE License #: 32194 License Expiration: 09/11/2025
Address: 433 S. KINZER AVENUE, MOUNTAIN VIEW AND LAUREL VIEW, NEW HOLLAND, PA 17557
County: LANCASTER Region: CENTRAL

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: GARDEN SPOT VILLAGE
Address: 433 S. KINZER AVENUE, NEW HOLLAND, PA, 17557
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: I-2 Date: 01/12/2017 Issued By: Franklin Township

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 62 Waking Staff: 47

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
Reason: Renewal Exit Conference Date: 05/14/2025

Inspection Dates and Department Representative

05/13/2025 - On-Site: [REDACTED]
05/14/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information			
License Capacity:	110	Residents Served:	62
Secured Dementia Care Unit			
In Home:	No	Area:	Capacity:
Hospice			
Current Residents:	1		
Number of Residents Who:			
Receive Supplemental Security Income:	0	Are 60 Years of Age or Older:	62
Diagnosed with Mental Illness:	1	Diagnosed with Intellectual Disability:	1
Have Mobility Need:	0	Have Physical Disability:	0

Inspections / Reviews

05/13/2025 - Full
Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 06/06/2025

06/02/2025 - POC Submission
Submitted By: [REDACTED] Date Submitted: 06/02/2025
Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 06/09/2025

Inspections / Reviews *(continued)*

06/03/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/02/2025

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

19 - Review Waiver

1. Requirements

2600.

19.e. The home shall notify the affected resident and designated person of the approval or denial of the waiver. A copy of the waiver request and the Department's written decision shall be posted in a conspicuous and public place within the home.

Description of Violation

A waiver dated 03/17/25 was granted for 2600.54a(2), due to a direct care staff member receiving education outside of the United States. The home failed to conspicuously and publicly post the waiver in the home.

Plan of Correction

Accept (█ - 06/02/2025)

Immediate action:

On 5/13/24 during licensing survey- this administrator immediately posted the recently requested waiver regarding educational status of a team member. See Attached photo.

Education: Licensing Surveyor educated this administrator on Regulation 2600.19(e) regarding "waiver shall be posted in conspicuous and public place within the home."

Moving Forward:

All granted waivers will be posted immediately upon receipt. This administrator is responsible for all waivers and will take full responsibility for all current and future postings. Review of waivers/waiver process will be reviewed at Quality Assurance Meeting beginning June 4, 2025.

Respectfully submitted- █, PCHA 5/29/2025

Licensee's Proposed Overall Completion Date: 05/29/2025

Implemented (█ - 06/03/2025)

225c - Additional Assessment

2. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

- 1. Annually.

Description of Violation

Resident #2's most recent assessment dated █ does not include an assessment for moderate mobility, as indicated on the resident's most recent medical evaluation dated █

Resident #3's most recent assessment dated █ does not include an assessment the resident can self-administer medications - no assistance from others as indicated on the resident's recent medical evaluation dated █.

Plan of Correction

Accept (█ - 06/02/2025)

Resident #2- Med Eval 12/20/24 - Moderate (immobile) box was checked by CRNP for resident after leaving █ facility. This was not accurate. Resident was Minimal (mobile) requiring limited assistance.

Immediate Action:

225c - Additional Assessment (continued)

Educated Clinical Care Coordinator to carefully review Med Eval for notation of Mobility Status to ensure the box reflecting the most accurate ability of resident is checked. 5/29/2025. CRNP to review Med Eval on 5/30/25 when rounding to review and mark correct box. CCC will ensure the RASP reflects the Med Eval following visit.

Moving Forward:

Admission Coordinator educated on 5/29/2025, (along with Clinical Care Coordinator), to review all Med Evals for new admissions and re-admissions to ensure the correct box for mobility status is checked. If box other than Independent or Minimal Assistance is marked, she will alert the Clinical Care Coordinator. Clinical Care Coordinator will ensure mobility status is addressed with Attending Physician or CRNP, promptly. RASP will reflect the most current Med Eval.

Resident #3- The resident self-administer medication was inadvertently marked (incorrectly) on the annual DME and signed by the CRNP. Once discovered the CRNP corrected form on 5/14/2025, during licensing survey. (see attached) Resident cannot Self-Administer Medications.

Educated Clinical Care Coordinator on 5/14/25 to carefully check annual DME's for any errors/changes that may be reflected from previous year.

Moving Forward:

Dayshift Nurse rounding with CRNP will also check annual Med Eval's and alert the Clinical Care Coordinator to any notations/changes from previous year. This to begin 5/30/2025. LPN's informed/educated on 5/29/25.

Respectfully submitted- [REDACTED] PCHA 5/29/25

Licensee's Proposed Overall Completion Date: 05/30/2025

Implemented ([REDACTED] - 06/03/2025)