



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

SEP 1 1 2013

Ms. Michelle Hamilton, Chief of Senior Living Operations
The Ecumenical Communities, Inc.
830 Cherry Drive
Hershey, Pennsylvania 17033

RE: Ecumenical Retirement Community of Harrisburg II
601 Wilhelm Road
Harrisburg, Pennsylvania 17111

Dear Ms. Hamilton:

As a result of the Department of Public Welfare's licensing inspection on May 22, 2013, 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 2600 must be maintained.

Your regular license for the period September 18, 2013 to September 18, 2014 was issued on June 17, 2013. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink, appearing to read "R. Melusky".

Ronald Melusky
Director

Enclosure
License Inspection Summary

VIOLATION REPORT
PERSONAL CARE HOMES - 56 Pa.Code Chapter 2600

PCH Name: ECUMENICAL RETIREMENT COMMUNITY OF HARRISBURG II		License Number: 362150
Address: 601 WILHELM ROAD, HARRISBURG, PA 17111		County: Dauphin
Administrator: Judi Baker, Executive Director		Region: CENTRAL
Legal Entity Name: THE ECUMENICAL COMMUNITIES INC		
Legal Entity Address: 830 CHERRY DRIVE, HERSHEY, PA 17033		
Certificate(s) of Occupancy C-2 LP 02/19/1997 L&I		
Staffing Hours Resident Support: NM Total Daily Staff: 82 Waking Staff: 62		
Type of Inspection: Full SHA Docket Number: NA Notice: Unannounced		
Reason(s) for inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 05/22/2013: Riel, Becky; Mirmich, Ron		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details: Partial or Full Triggers: NA Random Indicators: NA		
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 104	Number of Residents who:	
Number of Residents Served: 82	Receive Supplemental Security Income: 15	
Secured Dementia Care Unit in Home: No	Are 60 Years of Age or Older: 82	
Area:	Have Mental Illness: 0	
Secured Dementia Unit Capacity, if Applicable:	Have an Intellectual Disability: 0	
Number of Residents Served in Secured Dementia Care Unit, if applicable:	Have a Mobility Need: 0	
Number of Current Hospice Residents: 1	Have a Physical Disability: 7	
Number of Hospice Residents in past year: 1		

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JUL 02 2013

CENTRAL REGION FIELD OFFICE
Human Services Licensing

Violation Report: 36215 - 05/22/2013 - Riel, Becky
 PCH Name: ECUMENICAL RETIREMENT COMMUNITY OF HARRISBURG II

1. REGULATION 55 Pa.Code §2600
 2600.26(b) - The quality management plan shall address the periodic review and evaluation of the following:
 (1) The reportable incident and condition reporting procedures.
 (2) Complaint procedures.
 (3) Staff person training.
 (4) Licensing violations and plans of correction, if applicable.
 (5) Resident or family councils, or both, if applicable.

2a. DESCRIPTION OF VIOLATION
 The home's quality management review did not address reportable incident and condition reporting procedures.

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.

On May 27, 2013, the Quality Management plan was completed by addressing reportable incident and condition reporting procedures.
 Ongoing, the executive director / designee will ensure timely completion of the Quality Management plan. *And ensure all components of the plan are included.*

AP

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) Diana Ponterio, Vice President of Operations Date July 1, 2013

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

The above plan of correction is approved as of <u>7/15/13</u> (Date)	Plan of correction implementation status as of <u>7/15/13</u> (Date)
The above plan of correction was approved by <u>[Signature]</u> (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: 36215 - 05/22/2013 - Riel, Becky
 PCH Name: ECUMENICAL RETIREMENT COMMUNITY OF HARRISBURG II

1. REGULATION 55 Pa.Code §2600
 2600.63(a) - At least one staff person for every 50 residents who is trained in first aid and certified in obstructed airway techniques and CPR shall be present in the home at all times.

2a. DESCRIPTION OF VIOLATION

- On Tuesday, 5/7/2013, from 10:30pm-11:00pm, approximately 82 residents were present in the home. During this time one staff person was present in the home who was certified in first aid, obstructed airway techniques and CPR.
- On Friday, 5/10/2013, from 10:00pm-11:00pm, approximately 82 residents were present in the home. During this time one staff person was present in the home who was certified in first aid, obstructed airway techniques and CPR.
- On Sunday, 5/12/2013, approximately 82 residents were present in the home. From 10:00-10:30pm, one staff person was present in the home who was certified in first aid, obstructed airway techniques and CPR. From 10:30pm-11:00pm, no staff persons were present in the home who were certified in first aid, obstructed airway techniques and CPR.

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.

On June 16, 2013 co-worker attended First Aid and CPR training and received certification.

Ongoing executive director / designee will perform random audits of personnel files to ensure compliance with staffing requirements.

And Review staffing schedules to ensure there is one person trained in CPR/FA for every 50 residents.

CTR

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Violation Report: 36215 - 05/22/2013 - Riel, Becky
 PCH Name: ECUMENICAL RETIREMENT COMMUNITY OF HARRISBURG II

1. REGULATION 55 Pa.Code §2600
 2600.109(b) - Cats and dogs present at the home shall have a current rabies vaccination. A current certificate of rabies vaccination from a licensed veterinarian shall be kept.

2a. DESCRIPTION OF VIOLATION
 On 5/22/2013, a resident's cat was present at the home. The rabies vaccination for the cat expired on 4/12/2013.

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.

On June 13, 2013, resident's cat received rabies vaccination. Ongoing the pet coordinator will ensure all pets have necessary vaccinations. *The pet coordinator will review documentation for all current pets who reside in or visit the home to ensure vaccinations are current. bc*

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Violation Report: 36218 - 05/22/2013 - Riel, Becky

Facility Name: ECUMENICAL RETIREMENT COMMUNITY OF HARRISBURG II

1. REGULATION 55 Pa. Code §2600

2600.132(g) - Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

2a. DESCRIPTION OF VIOLATION

The home has 2 staff persons routinely scheduled during sleeping hours, from 11pm-7am. Of the past 3 sleeping hour fire drills, not one was conducted with less than 3 staff participating. The home routinely schedules sleeping hour fire drills when additional staff persons are present.

The last 3 sleeping hour fire drills were as follows:

- 9/28/2012 @ 6:18am 3 staff persons participated
- 12/13/2012 @ 6:00am 3 staff persons participated
- 4/29/2013 @ 6:06am 4 staff persons participated

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.

Maintenance director will be responsible for scheduling and conducting drills during sleeping hours when no additional staff persons are present.

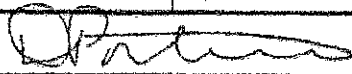
Ongoing executive director / designee will audit the fire drill log monthly to ensure compliance.

The home needs to demonstrate successful completion of a fire drill with the least number of staff who may be working in the home

CO

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Violation Report: 36215 - 05/22/2013 - Rial, Becky
 PCH Name: ECUMENICAL RETIREMENT COMMUNITY OF HARRISBURG II

1. REGULATION 55 Pa.Code §2600

2600.181(d) - If the resident does not need assistance with medication, medication may be stored in a resident's room for self-administration. Medications stored in the resident's room shall be kept locked in a safe and secure location to protect against contamination, spillage and theft.

2a. DESCRIPTION OF VIOLATION

Resident #1 self administers medications and stores medications in their room. On 5/22/2013, the resident's medications were being stored in the second drawer of the resident's dresser. The medications were not locked, allowing access to the resident's roommate.

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.

On May 30, 2013, resident was made aware that medications must be kept in a locked area. Resident has placed the medications in a locked desk drawer.

Ongoing, executive director / DOW / designee will ensure residents self medicating have medications in a locked area and ensure that any new residents who administer their own medications will be informed of the requirement and arrangements for a locked area/container will be made.
 LAC

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Violation Report: 36215 - 05/22/2013 - Riel, Becky
 PCH Name: ECUMENICAL RETIREMENT COMMUNITY OF HARRISBURG II

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

On 4/1/2013, Resident #2 began receiving Hospice services. The resident's support plan does not address the resident's need for Hospice and who is responsible for providing specific care/treatments.

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 #2 support plan was updated on May 29, 2013 to include Hospice and who is responsible for providing care. Ongoing, executive director / designee will perform random audits to ensure compliance.

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