



SEP 25 2013

Ms. Beth McMaster, Vice President/COO  
United Church of Christ Homes, Inc.  
30 North 31st Street  
Camp Hill, Pennsylvania 17011

RE: Lebanon Valley Home  
550 East Main Street  
Annville, Pennsylvania 17003

Dear Ms. McMaster:

As a result of the Department of Public Welfare's licensing inspection on August 19, 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 Ch. 2600 (relating to Personal Care Homes) must be maintained.

Your regular license for the period October 7, 2013 to October 7, 2014 was issued on June 21, 2013. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink, appearing to be "R. Melusky", written in a cursive style.

Ronald Melusky  
Director

Enclosure  
License Inspection Summary

**VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: LEBANON VALLEY HOME		License Number: 347800
Address: 550 EAST MAIN STREET, ANNVILLE, PA 17003		County: Lebanon
Administrator: Rebecca Glass		Region: CENTRAL
Legal Entity Name: UNITED CHURCH OF CHRIST HOMES INC		
Legal Entity Address: 30 NORTH 31ST STREET, CAMP HILL, PA 17011		
Certificate(s) of Occupancy C-1 03/10/1976 Labor and Industry		
<b>Staffing Hours</b>		
Resident Support: 0	Total Daily Staff: 27	Waking Staff: 20
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 08/19/2013: Gensil, Lori; Rosenblat, Dale		
Off-Site Inspection Dates and Inspectors, if Applicable		
<p><b>RECEIVED</b></p> <p>SEP 05 2013</p> <p>CENTRAL REGION FIELD OFFICE Human Services Licensing</p>		
Other Details		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 40 Number of Residents Served: 27 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 0 Number of Hospice Residents in past year: 1	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 25 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 0 Have a Physical Disability: 0	

Violation Report: 34780 - 08/19/2013 - Gensil, Lori  
PCH Name: LEBANON VALLEY HOME

1. REGULATION 55 Pa. Code §2600

2600.183(c) - Prescription medications, OTC medications and CAM stored in a refrigerator shall be kept in an area or container that is locked.

2a. DESCRIPTION OF VIOLATION

Lantus 100 u, prescribed for Resident #1, was unlocked and accessible in the refrigerator in the medication administration area.

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.

- ① LPN on duty immediately locked up the medication in question.
- ② Education will be provided to all LPNs by 9/14/13 on the regulation and the importance of storing medications in a locked area. Staff will be required to check for compliance upon each change of shift.
- ③ A new audit tool has been created to ensure future compliance of storing medications in a locked area. PCHA will complete this audit weekly for 3 months. After this time period, PCHA will continue to audit on a regular basis.
- ④ PCHA will inspect the locked <sup>area</sup> each day PCHA is onsite for one month.

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

Signature of Legal Entity Representative *Rebecca Glass*  
(Required on EVERY Page)

Printed Name and Title of Legal Entity Representative *Rebecca Glass, NHA*      Date *9/5/13*  
(Required on EVERY Page)

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

The above plan of correction is approved as of 9-19-13  
(Date)

Plan of correction implementation status as of 9-19-13  
(Date)

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

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

Violation Report: 34780 - 08/19/2013 - Gensil, Lori  
PCH Name: LEBANON VALLEY HOME

1. REGULATION 55 Pa.Code §2600  
2600.183(d) - Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home

2a. DESCRIPTION OF VIOLATION  
Resident #2's Humalog 100 u has a use-by date of 4/26/13 typed on the label. There was no other Humalog 100 u available for Resident #2.

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.

- ① Resident had an order for Humalog 100u sliding scale, which had not been needed within the past year - the vial was unopened, and the resident did not receive any expired medication. The expiration date on the actual vial was 10/2014.
- ② This vial was discarded immediately and the order was discontinued by the Resident's physician.
- ③ Education will be provided to all CPNs by 9/14/13 on the regulation and the importance of discarding medication after the use-by date on the label.
- ④ A new audit tool has been created to ensure future compliance. PCHA will complete this audit weekly for 3 months and on a regular basis thereafter.

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

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

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Rebecca Glass, NHA*      Date *9/5/13*

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Violation Report: 34780 - 08/19/2013 - Gensil, Lori  
PCH Name: LEBANON VALLEY HOME

1. REGULATION 55 Pa.Code §2600

2600.187(a) - A medication record shall be kept to include the following for each resident for whom medications are administered:

- (1) Resident's name.
- (2) Drug allergies.
- (3) Name of medication.
- (4) Strength.
- (5) Dosage form.
- (6) Dose.
- (7) Route of administration.
- (8) Frequency of administration.
- (9) Administration times.
- (10) Duration of therapy, if applicable.
- (11) Special precautions, if applicable.
- (12) Diagnosis or purpose for the medication, including pro re nata (PRN).
- (13) Date and time of medication administration.
- (14) Name and initials of the staff person administering the medication.

2a. DESCRIPTION OF VIOLATION

The medication administration record for Resident #2 states, "Humalog Subcutaneous Solution 100 sliding scale before breakfast." The most current physician's order states, "Humalog 100 u sliding scale glucose meter checks Monday and Friday mornings."

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 explanation/POC. Page 4A of 5.*

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)

*Rebecca Glass, NHA*

Date

*9/5/13*

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Page 4A of 5

3. Plan of Correction for Regulation 55 Pa Code 2600.187(a)

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The physician's order for sliding scale and glucose checks on Monday and Friday was entered on the MAR as two separate entries—one for the sliding scale and one for the glucose checks. On days where there were no blood sugar checks ordered to be taken, the order was either skipped on the MAR or indicated that no injection was given. The physician's intention was that the sliding scale would be given 2x per week if indicated by the blood sugar results taken on Monday and Friday. The order itself was poorly written, and therefore interpreted as two separate orders entered on the MAR as such. The order for glucose checks had previously been for 3x per week and was changed to 2x per week at the Resident's request. The physician agreed, but would not discontinue the sliding scale altogether at the time. The Resident has not needed the sliding scale within the past year. The physician discontinued the sliding scale on 8/19/13.

*RLH*

Signature of Legal Entity Representative

*Rebecca Glass, NHA*

Printed Name and Title of Legal Entity Representative

*9/5/13*

Date

Violation Report: 34780 - 08/19/2013 - Gansil, Lori  
PCH Name: LEBANON VALLEY HOME

1. REGULATION 55 Pa Code §2600  
2600.187(d) - The home shall follow the directions of the prescriber.

2a. DESCRIPTION OF VIOLATION

Resident #2 has a doctor's order for blood sugar checks every Monday and Friday. The home completed blood sugar checks on 8/1, 8/5, 8/6, 8/7, 8/10, 8/15, 8/16 and 8/19/2013. The blood sugar checks should have occurred on 8/2, 8/5, 8/9, 8/12, 8/16 and 8/19/2013.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

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*Violation withdrawn - ge*

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Date(s) of Previous Violation(s):

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*RGL*

Printed Name and Title of Legal Entity Representative  
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*Rebecca Glass, NHA*

Date

*9/5/13*

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