



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

APR 28 2014

Ms. Michele Metzler, Executive Director  
LutherCare  
600 East Main Street  
Lititz, Pennsylvania 17543

RE: Spang Crest Manor  
945 Duke Street  
Lebanon, Pennsylvania 17042  
License #: 320840

Dear Ms. Metzler:

As a result of the Department of Public Welfare's licensing inspection on December 30, 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 must be maintained.

Your regular license for the period March 11, 2014 to March 11, 2015 was issued on December 2, 2013. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink, appearing to read "Matthew J. Jones", with a long horizontal flourish extending to the right.

Matthew J. Jones  
Acting Director

Enclosure  
License Inspection Summary



Violation Report: 32084 - 12/30/2013 - Hoover, Douglas  
 PCH Name: SPANG CREST MANOR

1. REGULATION 55 Pa.Code §2800  
 2600.25(b) - The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

2a. DESCRIPTION OF VIOLATION  
 The contract, dated 10/3/13, was not signed by resident #1 who was admitted on 10/4/13.

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.

Short term - 12/30/13 Statement was placed with contract indicating that resident was unable to sign contract at time of admission.

Long-term - Administrator/designee will monitor to ensure that all contracts are properly signed at time of admission. New admissions will be audited within 1 wk of admission for the next 3 months to identify any missing signatures.

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)      Date

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

The above plan of correction is approved as of 2/27/14 (Date)

Plan of correction implementation status as of 2/27/14 (Date)

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

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

Violation Report: 32084 - 12/30/2013 - Hoover, Douglas  
 PCH Name: SPANG CREST MANOR

1. REGULATION 55 Pa.Code §2600  
 2600.184(b) - If the OTC medications and CAM belong to the resident, they shall be identified with the resident's name.

2a. DESCRIPTION OF VIOLATION  
 Naphcon A eyedrops which belonged to resident #2 was not labeled with the resident's name.

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.

Short term - name was written on Naphcon A eye drop at the time that the missing name was noted 12/30/13 staff educated verbally.

Long term - 1/28/14 Written staff education. Administrator/designee will monitor for on-going compliance via a random med drawer audit weekly x 3 months.

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

Signature of Legal Entity Representative  
 (Required on EVERY Page) *Robin L. Wempert*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) Robin L. Wempert, LPA / PCHA      Date 1/28/14

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

The above plan of correction is approved as of 2/27/14  
 (Date)

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

Plan of correction implementation status as of 2/27/14  
 (Date)

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