



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

MAY 16 2014

Mr. Carl R. McAloose, President/CEO
LutherCare, Inc.
600 East Main Street
Lititz, Pennsylvania 17543

RE: St. John's Herr Estate
200 Luther Lane
Columbia, Pennsylvania 17512
License #: 321870

Dear Mr. McAloose:

As a result of the Department of Public Welfare's licensing inspection on April 16, 2014, 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 May 18, 2014 to May 18, 2015 was issued on February 10, 2014. Your regular license remains in good standing.

Sincerely,

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

Matthew J. Jones
Director

Enclosure
License Inspection Summary

Violation Report: 32187 - 04/16/2014 - Minnich, Ron
 PCH Name: ST JOHN S HERR ESTATE

1. REGULATION 55 Pa.Code §2600
 2600.132(a) - An unannounced fire drill shall be held at least once a month.

2a. DESCRIPTION OF VIOLATION
 The home did not conduct a fire drill during February 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.

The unannounced February Fire Drill was accidentally missed. Practicing evacuation through fire drills is extremely important for the safety of our residents. The monthly fire drill schedule (*see attached sheet*) will be monitored by the Manager of Maintenance and the PC Manager to insure drills are conducted monthly per regulation 2600.132(a).

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



Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
Anita Martin	5/7/14

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

The above plan of correction is approved as of <u>5.8.14</u> (Date)	Plan of correction implementation status as of <u>5.8.14</u> (Date)
The above plan of correction was approved by <u>je</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: 32187 - 04/16/2014 - Minnich, Ron
 PCH Name: ST JOHN S HERR ESTATE

1. REGULATION 55 Pa.Code §2600
 2600.132(c) - A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

2a. DESCRIPTION OF VIOLATION
 The fire drill record for the drill conducted on March 18, 2014 does not include the exit route used and the number of residents in the home at the time of the drill.

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.

The failed Fire Drill record dated March 18, 2014 (*see attached sheet*) was not logged on the DPW log. The evacuation route also was not noted on the record. Fire drill records will be reviewed by the Manager of Maintenance and the PC Manager for accuracy. Staff has been educated on the importance of Fire Drills and accuracy of records and logs per regulation 2600.132(c).


The PC Manager will monitor all fire drills and the fire drill record to ensure a fire drill is conducted at least once a month and is documented on a fire drill record which includes all information required by 2600.132c. *go*

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Printed Name and Title of Legal Entity Representative <i>(Required on EVERY Page)</i> Anita Martin	Date 5/7/14
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Violation Report: 32187 - 04/16/2014 - Minnich, Ron
PCH Name: ST JOHN S HERR ESTATE

1. REGULATION 55 Pa.Code §2600
2600.132(d) - Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.

2a. DESCRIPTION OF VIOLATION
The fire safety letter dated September 30, 2013, indicated that the safe evacuation time for the home is 8 minutes and 30 seconds. The evacuation time for the fire drills conducted on March 16, 2014 at 11:05pm was 18 minutes and 4 seconds and March 21, 2014 at 5:50am was 9 minutes and 30 seconds.

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.

A repeated Fire Drill was held on March 21, 2014 and logged as passed. The evacuation time was noted at 9 min and 30 seconds. The evacuation time specified by the fire safety expert has been determined to be no more than 8 min and 30 sec. Staff have been educated on the determined evacuation time(see attached reminder). Fire drill records will be reviewed by the Manager of Maintenance and the PC Manager for accuracy.

A Fire Drill was held(see attached sheet) on April 17, 2014 @ 11:01pm with 35 residents evacuated in 5 min and 52 sec. per regulation 2600.132(d).

5/31/14 - A sleeping hours fire drill will be conducted with the least amount of staff working a shift, which is currently 2 staff. Documentation of the fire drill will be submitted to the Department. *vw*

All future sleeping hours fire drills will be conducted with the least amount of staff working during that shift, not routinely when additional staff persons are present. *vw*

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) *Anita Martz* Date *5/7/14*

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(Date)

The above plan of correction was approved by *vw*
(Initials)

Plan of correction implementation status as of 5.9.14
(Date)

- Fully Implemented
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- Not Implemented

Violation Report: 32187 - 04/16/2014 - Minnich, Ron
 PCH Name: ST JOHN S HERR ESTATE

1. REGULATION 55 Pa.Code §2600
 2600.141(a)(2) - The medical evaluation must include the following: (1) through (10)


2a. DESCRIPTION OF VIOLATION
 The medical evaluation for resident #1, dated 4/05/14, does not include the date of when the resident was evaluated, date the form was completed, blood pressure and temperature readings,
 The medical evaluation for resident #2, dated 4/08/14, does not include the date of when the resident was evaluated, date the form was completed, body positioning, health status, cognitive functioning and the mobility needs assessment.

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.

Staff has been educated to complete the upper portion of medical evaluations prior to sending to appointment. DME's are reviewed for accuracy when returned. If necessary are faxed back to physician for updates per regulation 2600.141. When medical evaluations are accurately completed the Personal Care Supervisor initials the lower right hand corner and files in resident's chart. (see attached example)

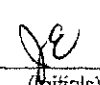
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Violation Report: 32187 - 04/16/2014 - Minnich, Ron
 PCH Name: ST JOHN S HERR ESTATE

1. REGULATION 55 Pa.Code §2600
 2600.141(b)(1) - A resident shall have a medical evaluation at least annually.

2a. DESCRIPTION OF VIOLATION
 Resident #3's current medical evaluation was completed on 2/21/14; more than a year after the previous medical evaluation completed on 2/05/13.

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.

Staff has been educated on the importance of scheduling medical evaluations on a timely basis to insure they are completed at least annually or with any significant change. The 1st shift LPN is responsible for tracking Medical evaluations and insuring they are completed in a timely manner.

By 5/31/13 - The administrator or designated staff person will check all resident records to ensure a current medical evaluation is completed and present in each residents' record. *je*

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 (Initials)

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Violation Report: 32187 - 04/16/2014 - Minnich, Ron
 PCH Name: ST JOHN S HERR ESTATE

1. REGULATION 55 Pa.Code §2600

2600.183(e) - Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

2a. DESCRIPTION OF VIOLATION

Resident #4's bottle of Glucose 40% Gel for Hypoglycemia has an RX Label with an expiration date of 1/09/13.

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.

Glucose Gel was immediately replaced for Resident#4 (see attached documentation). Expiration dates are checked routinely on OTC and CAM. Routine audits will be completed by the PC Manager.

Quarterly see

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 (Initials)

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Violation Report: 32187 - 04/16/2014 - Minnich, Ron
 PCH Name: ST JOHN S HERR ESTATE

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 #4 does not include staff's initials for the administration of Novolog Insulin on 4/01/14 and 4/06/14 at 11:00am.

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.

(The violation report describes the error occurring on 4/1 and 4/6 but it actually occurred during the survey on 4/16/14)

During the medication observation for resident #4 it was noted the LPN did not immediately sign for the Novolog insulin. The MAR for resident #4 was immediately completed. MAR's are signed immediately after medication assistance. MAR's are double checked for accuracy at the end of each shift.

*Quarterly
 PE*

Routine observation audits will be completed by the PC Manager.

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 (Required on EVERY Page) *Anita Martin*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Anita Martin* Date *5/7/14*

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