



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAY 18 2015

Mr. Robert Rundle, President/CEO
Spiritrust Lutheran
1050 Pennsylvania Avenue
York, Pennsylvania 17404

RE: Spiritrust Lutheran The Village at Shrewsbury
Personal Care Building, 800 Bollinger Drive
Shrewsbury, Pennsylvania 17361
License #: 310270

Dear Mr. Rundle:

As a result of the Department of Human Services' licensing inspection on April 22, 2015 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 June 17, 2015 to June 17, 2016 was issued on March 25, 2015. Your regular license remains in good standing.

Sincerely,

Matthew J. Jones
Director

Enclosure
License Inspection Summary

Violation Report: 31027 - 04/22/2015 - Springs, Israel
 PCH Name: SpiritTrust Lutheran the Village at Shrewsbury

1. REGULATION 55 Pa.Code §2600
 2600.25(a)(1) - Prior to admission, or within 24 hours after admission, a written resident-home contract (contract) between the resident and the home shall be in place.

2a. DESCRIPTION OF VIOLATION
 The contract for Resident #4 who was admitted to the home on 11/1/13 was signed on 11/4/13.

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.

- Within 24 hours after admission, a written resident-home contract shall be in place.
- This regulation was violated when the contract for a resident admitted to the Personal Care Home on 11/1/2013 was not signed until 11/4/2013.
- Above is after the allotted 24-hour time period given for contracts to be signed.
- A resident-home contract tool was created and all current resident contracts have been audited on 4/23/2015 and 4/24/2015. Copy of this audit sheet is attached.
- In order to prevent future violations, starting 4/23/2015 and on-going, a check system has been put in place to ensure that all contracts are signed and dated within 24 hours of admission. The Personal Care Home's Retirement Counselor/designee currently completes the resident-home contract. The Personal Care Administrator/designee will provide a double check of all contract signatures and dates.
- Plan of correction for this violation is monitored through our Quality Management process for further recommendations and follow through to prevent future violations.

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

Keri E. Puna

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
Keri E. Puna, Personal Care Administrator	5/6/2015

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

The above plan of correction is approved as of 5/11/15
 (Date)

Plan of correction implementation status as of 5/11/15
 (Date)

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

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

Violation Report: 31027 - 04/22/2015 - Springs, Israel
 PCH Name: SpiritTrust Lutheran the Village at Shrewsbury

1. REGULATION 56 Pa.Code §2600
 2600.89(b) - Hot water temperature in areas accessible to the resident may not exceed 120°F.

2a. DESCRIPTION OF VIOLATION

The hot water at the bathroom sink of room 202B had a temperature of 126 degrees fahrenheit.

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.

- In order to prevent residents from being scalded by the hot water they have access to, hot water temperature should not exceed 120°F. During our annual inspection, the hot water at the bathroom sink in room 202B had a temperature of 126°F, related to the closeness of this room to the boiler.
- The contractor was contacted on 4/23/2015 and came to Personal Care Home on 4/24/2015 to provide assistance to regulate the water temperature on the boiler.
- On 4/23/2015, the Buildings and Grounds supervisor turned down the boiler thermostat. By the morning of 4/24/2015, the hot water temperature at the bathroom sink of room 202B had a temperature of 114°F.
- On 4/23/2015, a digital thermometer was purchased to replace the current thermometer being used to complete monthly safety tour audits to ensure better accuracy. To ensure long-term accuracy, an infrared thermometer has been ordered for use during monthly safety tour audits.

(Continued onto next page) See Page 3-A

Repeat Violation: No Date(s) of Previous Violation(s): n/a

Signature of Legal Entity Representative
 (Required on EVERY Page) *Meri E. Puna*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Meri E. Puna, Personal Care Administrator Date 5/6/2015

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The above plan of correction is approved as of 5/11/15
 (Date)

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

Plan of correction implementation status as of 5/11/15
 (Date)

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Regulation 2600.89(b), Plan of Correction continued:

- On-going weekly hot water temperature audits will be completed by Building and Grounds team members.
- Plan of correction for this violation is monitored through our Quality Management process for further recommendations and follow through to prevent future violations.



Keri E. Puna, Personal Care Administrator 5/6/2015

Violation Report: 31027 - 04/22/2015 - Springs, Israel
 PCH Name: SpiritTrust Lutheran the Village at Shrewsbury

1. REGULATION 55 Pa.Code §2600

2600.105(g)(1) - To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.

2a. DESCRIPTION OF VIOLATION

The lint trap of the dryer in the laundry room on the South Hall was full of lint.

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.

- To reduce the risk of fire hazards, lint shall be removed from lint traps in both resident Personal Care dryers after each use.
- During our annual inspection, the lint trap in the laundry room on the South Hall had lint on it.
- When checked, cause found to be due to a resident drying their clothes that afternoon and forgetting to clean the lint trap.
- Upon finding lint on the lint trap of dryer in the laundry room during annual inspection, it was immediately cleaned and lint disposed of.
- On 4/23/2015, direct care staff assignment sheets were updated to include the task of checking dryer lint traps every shift to ensure they are free of lint. Staff assignment sheet attached.
- Plan of correction for this violation is monitored through our Quality Management process for further recommendations and follow through to prevent future violations.

Repeat Violation: No	Date(s) of Previous Violation(s):	n/a
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Keri E. Puna*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Keri E. Puna, Personal Care Administrator</i>	Date <i>5/6/2015</i>
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The above plan of correction is approved as of *5/11/15*
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The above plan of correction was approved by *CS*
 (Initials)

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Violation Report: 31027 - 04/22/2015 - Springs, Israel
 PCH Name: SpiritTrust Lutheran the Village at Shrewsbury

1. REGULATION 55 Pa.Code §2600
 2600.171(b)(5) - If staff persons or volunteers of the home provide transportation for the residents, the vehicle must have a first aid kit with the contents in § 2600.96 (relating to first aid kit).

2a. DESCRIPTION OF VIOLATION
 The first aid kit in the 2014 white Dodge Van did not contain a thermometer.

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.

- To ensure that first aid can be administered to residents receiving transportation services, a thermometer must be in all first aid kits in transportation vehicles.
- During our annual inspection, the first aid kit in the 2014 white Dodge Van did not contain a thermometer.
- Upon notification of thermometer missing from the first aid kit in the 2014 white Dodge Van by an inspector, a thermometer was placed in this first aid kit on 4/22/2015.
- On 4/23/2015, all transportation vehicles' first aid kits were audited to ensure all required items are in each vehicle's first aid kit. Audit sheet is attached.
- Transportation staff training on first aid kit education is scheduled for 5/14/2015. Monthly transportation vehicle first aid kit audits are in place to be completed by Transportation staff members. See attached Monthly Vehicle Inspection form.
- Plan of correction for this violation is monitored through our Quality Management process for further recommendations and follow through to prevent future violations.

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

Kerrie Pina

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
Kerrie Pina Personal Care Administrator	5/6/2015

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 (Date)

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

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