



pennsylvania
DEPARTMENT OF HUMAN SERVICES

AUG 12 2015

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

RE: Spiritrust Lutheran The Village at Kelly Drive
750 Kelly Drive
York, Pennsylvania 17404
License #: 350640


Dear Mr. Rundle:

As a result of the Department of Human Services' licensing inspection on June 12, 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 16, 2015 to June 16, 2016 was issued on March 9, 2015. Your regular license remains in good standing.

Sincerely,


Matthew J. Jones
Director ^{1/SH}

Enclosure
License Inspection Summary

Violation Report: 35084 - 06/12/2015 - Rouse, McKinley
 PCH Name: SPIRITRUST LUTHERAN THE VILLAGE AT KELLY DRIVE

1. REGULATION 55 Pa.Code §2600
 2600.89(b) - Hot water temperature in areas accessible to the resident may not exceed 120°F.

2a. DESCRIPTION OF VIOLATION
 At 3:25PM the hot water temperature in the women's bathroom designated as room 1A was 126.7 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.

- June 12, 2015 -- Immediately, upon learning of the elevated water temperature, the Director of Building and Grounds decreased the water temperature at the Ray-Pac Boiler Unit and made adjustments to the storage tank temperature.
- June 12, 2015 -- 9:15pm water temperature in that area was checked and temperature at that time was 115°F.
- Water temperatures continued to be monitored closely, in that area, to ensure compliance: June 13, 2015 @ 9:00 am: 104°F; @ 2:35pm: 111°F; June 17, 2015: 116°F; July 4, 2015: 115°F; July 8, 2015: 113°F; July 10, 2015: 110°F; July 21, 2015: 116.2°F
- Water temperatures will continue to be monitored throughout the building, on a monthly basis. If water temperatures are noted to exceed 120°F, team member will notify Director of Building and Grounds, and adjustments will be made immediately. Water temperature logs will be maintained by Director of Building and Grounds.
- June 12th and June 13th: Director of Building and Grounds reviewed DHS Regulation 2600.89(b) with all department members.
- July 22, 2015: Director of Building and Grounds provided education to team members again on DHS Regulation 2600.89(b).
- Water Temperature logs will be reviewed during Quality Management meetings, to ensure compliance is being maintained.

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

Signature of Legal Entity Representative (Required on EVERY Page) Pam Conrad

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Pam Conrad, Executive Director Date 7/22/15

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| | |
|---|---|
| The above plan of correction is approved as of <u>7/24/15</u> (Date) | Plan of correction implementation status as of <u>7/24/15</u> (Date) |
| The above plan of correction was approved by <u>BAS</u> (Initials) | <input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented |

Violation Report: 35064 - 06/12/2015 - Rouse, McKinley
 PCH Name: SPIRITRUST LUTHERAN THE VILLAGE AT KELLY DRIVE

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 #1 does not include a diagnosis or purpose for the medication for the Clindamycin HCL 150mg, Warfarin 3mg, and Warfarin 4mg prescriptions.

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.

- June 12, 2015 - Diagnosis for each of the medications listed above were written on (Resident #1) medication administration record, during the time of inspection.
- Re-education of DHS Regulation 2600.187(a) was provided to all nurses.
- Nursing team will continue to conduct monthly audits of each Medication Administration Record, to ensure compliance with this regulation.
- Health Services Manager will conduct random monthly checks of Medication Administration Records, to ensure compliance is being maintained.

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

Signature of Legal Entity Representative (Required on EVERY Page) Pam Conrad

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|--|---------------------|
| Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <u>Pam Conrad, Executive Director</u> | Date <u>7/29/15</u> |
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The above plan of correction is approved as of 7/24/15
(Date)

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

Plan of correction implementation status as of 7/24/15
(Date)

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