



pennsylvania
DEPARTMENT OF HUMAN SERVICES

NOV 05 2015

Ms. Angela Dohrman, Vice President of Senior Living
Spiritrust Lutheran
2735 Luther Drive
Chambersburg, Pennsylvania 17202

RE: Spiritrust Lutheran the Village at Luther Ridge
License #: 352980

Dear Ms. Dohrman:

As a result of the Department of Human Services' annual licensing inspection on August 11, 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.

Sincerely,

A handwritten signature in black ink that reads "Matthew J. Jones".

Matthew J. Jones
Director

Enclosure
License Inspection Summary

Violation Report: 35296 - 08/11/2015 - Hoover, Douglas
 PCH Name: THE VILLAGE AT LUTHER RIDGE

1. REGULATION 55 Pa.Code §2600

2600.225(a) - A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

2a. DESCRIPTION OF VIOLATION

Resident #1, admitted [redacted]/15, did not have an initial assessment completed until [redacted]/15.

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

Includes 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. The Health Services Manager (HSM) and the Personal Care Administrator (PCHA) (new to the position) have completed education on 2600.225(a) on 9-14-15 which was by the Executive Director. (See attached).
2. All new admissions will be tracked manually on a calendar by the HSM and the PCHA to ensure that the initial assessments are completed within the appropriate timeframe. This calendar will be setup to include any admissions in the month of September 2015 and ongoing.
3. An Outlook task will be generated by the PCHA to the HSM, for completion of resident assessment within the required timeframe, for all new admissions.
4. Additionally, the HSM and PCHA will conduct an audit of all current residents to ensure that their initial assessment was completed within the appropriate timeframe. Documentation will be made if any are found to be out of compliance of 2600.225(a) for future inspections.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Rachel Herrington, Executive Director	Date <i>9-16-15</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>10-15-15</u> (Date)	Plan of correction implementation status as of <u>10-15-15</u> (Date)
The above plan of correction was approved by <u>BE</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