



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

MAY 23 2016

Mr. Blake Daub, Senior VP HR & Administration Services  
LutherCare, Inc.  
600 East Main Street  
Lititz, Pennsylvania 17543

RE: The Muhlenberg Lodge  
300 St. Mark Avenue  
Lititz, Pennsylvania 17543  
License #: 321820

Dear Mr. Daub:

As a result of the Department of Human Services' annual licensing inspections on January 13, 2016 and January 14, 2016 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 "Jay Bausch".

Jay Bausch  
Deputy Secretary

Enclosure  
License Inspection Summary

**VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: THE MUHLENBERG LODGE		License Number: 32182
Address: 300 ST MARK AVENUE, LITITZ, PA 17543		County: Lancaster
Administrator: Terri Weitzel		Region: CENTRAL
Legal Entity Name: LUTHERCARE INC		
Legal Entity Address: 600 EAST MAIN STREET, LITITZ, PA 17543		
<b>Certificate(s) of Occupancy</b> C-2 LP 03/23/1999 Labor and Industry		
<b>Staffing Hours</b> Resident Support: 0                      Total Daily Staff: 91                      Waking Staff: 68		
Type of Inspection: Ind - Full                      BHA Docket Number:                      Notice: Unannounced		
<b>Reason(s) for Inspection(s)</b> Renewal, Indicator		
<b>On-Site Inspections Dates and Department Representatives On-Site</b> 01/13/2016: Gensil, Lori; McCloskey, Jason 01/14/2016: Gensil, Lori		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b>		
<p><b>RECEIVED</b></p> <p>MAR 15 2016</p> <p>CENTRAL REGION FIELD OFFICE Human Services Licensing</p>		
<b>Other Details</b> Partial or Full Triggers: 233d and 225a                      Random Indicators: 101o, 102h, 126a, 171b5, 233a		
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 90 Number of Residents Served: 70 Secured Dementia Care Unit in Home: Yes Area: SDU Secured Dementia Unit Capacity, if Applicable: 26 Number of Residents Served in Secured Dementia Care Unit, if applicable: 21 Number of Current Hospice Residents: 0 Number of Hospice Residents in past year: 1	<b>Number of Residents who:</b> Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 70 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 21 Have a Physical Disability: 0	

Violation Report: 32182 - 01/13/2016 - Gensil, Lori  
 PCH Name: THE MUHLENBERG LODGE

**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's assessment, dated 6/24/15, was incomplete. The sections on securing healthcare, securing transportation, managing finances, making and keeping appointments, caring for personal possessions, writing correspondences and securing health care were not completed.

**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.

*DRS. support plan + assessment dated 6/24/15 were corrected & completed.*

- Terri Weitzel completed p survey.
- Administrator/Team leader will follow up on each RASP for completeness and thoroughness. All team members will give completed RASP's to Team leader/Adm. upon completion

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *[Signature]* PCHA.

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>A. Terri Weitzel</i>	Date <i>3.10.16</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><i>4-6-16</i></u> (Date)	Plan of correction implementation status as of <u><i>4-6-16</i></u> (Date)
The above plan of correction was approved by <u><i>BE</i></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: 32182 - 01/13/2016 - Gensif, Lori  
 PCH Name: THE MUHLENBERG LODGE

**1. REGULATION 55 Pa.Code §2800**

2600.233(c) - If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

**2a. DESCRIPTION OF VIOLATION**

The directions for operating the home's locking mechanism are not conspicuously posted near exit doors A, B and G from the SDCU.

**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.*

- 1) The code was posted on each exit door immediately when seen by inspectors.
- 2) Codes will remain on all doors (at all times). Administrator will monitor that codes are posted, on-going. - 82

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)

*A. Terri Waitzel RHA*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page)

A. Terri Waitzel

Date 3.10.16

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- Partially Implemented - Inadequate Progress
- Not Implemented