



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

SEP 15 2016

Ms. Angela Dohrman, Vice President of Senior Living  
SpiriTrust Lutheran  
800 Bollinger Drive  
Shrewsbury, Pennsylvania 17361

RE: Spiritrust Lutheran The Village at Shrewsbury  
License #: 310270

Dear Ms. Dohrman:

As a result of the Department of Human Services' annual licensing inspection on May 25, 2016, and the corrections you have made after our inspection, we have found the above facility to be in compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes).

Sincerely,

A handwritten signature in black ink, appearing to read "J. Rowe".

Jacqueline L. Rowe  
Director

Enclosure  
Licensing Inspection Summary

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

PCH Name: SPIRITRUST LUTHERAN THE VILLAGE AT SHREWSBURY		License Number: 31027
Address: 800 BOLLINGER DRIVE, SHREWSBURY, PA 17361		County: York
Administrator: Angle McSwine		Region: CENTRAL
Legal Entity Name: SPIRITRUST LUTHERAN		
Legal Entity Address: 800 BOLLINGER DRIVE, SHREWSBURY, PA 17361		
<b>Certificate(s) of Occupancy</b> C-2 LP 03/26/2001 Labor and Industry		
<i>I-2</i> <i>12/04/2009</i> <i>Shrewsbury Twp.</i>		
<b>Staffing Hours</b>		
Resident Support: 0	Total Daily Staff: 67	Working Staff: 43
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
<b>Reason(s) for inspection(s)</b>		
Renewal		
<b>On-Site Inspections Dates and Department Representatives On-Site</b>		
05/25/2016: Gensil, Lori; McCloskey, Jason		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b>		
<p><b>RECEIVED</b></p> <p>JUL 29 2016</p> <p>CENTRAL REGION FIELD OFFICE Human Services Licensing</p>		
<b>Other Details</b>		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 68 Number of Residents Served: 57 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 0 Number of Hospice Residents in past year: 4	<b>Number of Residents who:</b> Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 57 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 0 Have a Physical Disability: 2	

Violation Report: 31027 - 05/25/2016 - Genail, Lori  
 PCH Name: SPIRITRUST LUTHERAN THE VILLAGE AT SHREWSBURY

**1. REGULATION 55 Pa. Code §2600**  
 2600.65(d) - Direct care staff persons hired after April 24, 2006 may not provide unsupervised ADL services until completion of the following:

- (1) Training that includes a demonstration of job duties, followed by supervised practice.
- (2) Successful completion and passing the Department-approved direct care training course and passing of the competency test.
- (3) Initial direct care staff person training to include the following:
  - (i) Safe management techniques.
  - (ii) ADLs and IADLs.
  - (iii) Personal hygiene.
  - (iv) Care of residents with dementia, mental illness, cognitive impairments, mental retardation and other mental disabilities.
  - (v) The normal aging-cognitive, psychological and functional abilities of individuals who are older.
  - (vi) Implementation of the initial assessment, annual assessment and support plan.
  - (vii) Nutrition, food handling and sanitation.
  - (viii) Recreation, socialization, community resources, social services and activities in the community.
  - (ix) Gerontology.
  - (x) Staff person supervision, if applicable.
  - (xi) Care and needs of residents with special emphasis on the residents being served in the home.
  - (xii) Safety management and hazard prevention.
  - (xiii) Universal precautions.
  - (xiv) The requirements of this chapter.
  - (xv) Infection control.
  - (xvi) Care for individuals with mobility needs, such as prevention of decubitus ulcers (bed sores), incontinence, malnutrition and dehydration, if applicable to the residents served in the home.

**2a. DESCRIPTION OF VIOLATION**  
 Direct Care Staff Person A, hired on 3/29/16, did not complete the Department-approved direct care on-line training course and competency test.

**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.

See attached Page 2 A of 2. -SE

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

Signature of Legal Entity Representative  
 (Required on EVERY Page) *Angela M. N. Swire, PCHA*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Angela M. N. Swire, PCHA* Date *7/22/16*

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

The above plan of correction is approved as of 8-12-16  
 (Date)

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

Plan of correction implementation status as of 8-12-16  
 (Date)

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

Plan of Correction- SpiritTrust Lutheran Zimmerman Place, Certificate #310270

Regulation 2600.65 requires that all direct care staff persons successfully complete and pass the test for the Department of Human Services approved direct care training course. Completion of this course ensures that all direct care staff have received formal training and a competency demonstrated orientation prior to providing care in the personal care residence.

On May 25, 2016 during DHS annual inspection a violation was found. Direct Care staff person A was hired on [REDACTED] and did not complete the Department approved direct care on-line training course and competency test. This violation was a result of a breakdown in the new hire orientation process.

Direct Care staff person A reported to work on [REDACTED] completed [REDACTED] on line training and testing (certificate attached exhibit A).

Effective immediately we are prepared to correct this violation by implementation of the following plan of correction:

1. The provisional offer of employment letter advises the new employee that they must successfully complete the DHS on-line training and competency test within 14 days of hire (attached exhibit B).
2. Upon hire in the department the following on-boarding checklist is implemented by the Health Services Manager. It ensures the on-line training and successful competency testing is completed prior to beginning direct care training with a mentor and the residents (see attached exhibit C).

To date we have audited all employee files to ensure compliance with Regulation 2600.65 Moving forward we will ensure future compliance and prevent future violations by auditing training records for all direct care staff quarterly. The audit will include new hire training requirements and DHS annual twelve hour training relating to their job duties for all direct care staff by the Personal Care Home Administrator/Designee.

Audits will be reviewed at Quality Management committee meeting for further follow up and recommendations.

Angela McSwine, LPN, PCHA

Angela McSwine, LPN, PCHA  
7/20/16

JE