



pennsylvania
DEPARTMENT OF HUMAN SERVICES

OCT 13 2016

Ms. Sue Boone, Administrator
Dallastown Operating, Inc.
621 East Main Street
Dallastown, Pennsylvania 17313

RE: Victorian Villa
License #: 320000

Dear Ms. Boone:

As a result of the Department of Human Services' annual licensing inspection on August 11, 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, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

Violation Report: 32000 - 08/11/2016 - Heemer, Laura
 PCH Name: VICTORIAN VILLA

1. REGULATION 56 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
 On 8/11/16 there was an accumulation of lint in the lint trap of the Amanda brand electric dryer on the bottom level laundry room of the home.

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.

The lint was immediately removed from the lint trap in the personal dryer on the 1st floor.

All staff that use the dryer will be required to sign the clipboard located on the shelf in the laundry room each time it is checked. Lint is to be removed after every load.

A sign has been placed on the dryer door to remind staff that the lint trap needs to be cleaned after each use

All staff were in-serviced on 8/17/16 regarding the cleaning of the lint trap.

An audit was initiated to check the lint trap daily x1 week, weekly x4, then monthly x2 by the PCA/designee and will be reported at the Quality Management meeting.

Repeat Violation: No	Date(s) of Previous Violation(s):	
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Signature of Legal Entity Representative (Required on EVERY Page)	<i>Jennifer Warfel, PCA</i>
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
<i>Jennifer Warfel PC Administrator</i>	<i>8/30/16</i>

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

The above plan of correction is approved as of 9/12/16
 (Date)

Plan of correction implementation status as of 9/12/16
 (Date)

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

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

Violation Report: 32000 - 08/11/2016 - Heemer, Laura
 PCH Name: VICTORIAN VILLA

1. REGULATION 55 Pa.Code §2600

2600.123(b) - Copies of the emergency procedures as specified in § 2600.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.

2a. DESCRIPTION OF VIOLATION

The home's emergency procedures are not posted in a conspicuous and public place in the home. The home's emergency procedures were placed in a bin on the left side wall behind the the nurse's station desk at the entrance of the home.

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.

The Emergency Plan is posted behind the nurses' station at the second floor when you walk into the main entrance. A sign has been posted on the wall at the nurses' station stating where the plan is located. The signage is also on the 1st floor library and the 3rd floor nurses station and on the public bulletin board on the 2nd floor.

All staff were in-serviced on 8/17/16 on the location of the emergency manual and the importance of ease of access for all staff, residents and visitors.

An audit was initiated to verify placement of signage weekly x4 then monthly x2 by the PCA/designee and will be reported at the Quality Management meeting.

Repeat Violation: No	Date(s) of Previous Violation(s):	
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Jennifer Wiertel, PCNA*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Jennifer Wiertel PC Administrator</i>	Date <i>8/30/16</i>
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The above plan of correction is approved as of 9/12/16
 (Date)

Plan of correction implementation status as of 9/12/16
 (Date)

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

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

Violation Report: 32000 - 08/11/2016 - Hoemer, Laura
 PCH Name: VICTORIAN VILLA

1. REGULATION 85 Pa.Code §2880

2800.187(b) - The Information in § 2600.187(a)(13) and § 2600.187(a)(14) shall be recorded at the time the medication is administered.

2a. DESCRIPTION OF VIOLATION

Resident 1 is prescribed Levothyroxine 122 mcg tabs to be given at 6 am. The medication administration record is marked as it having been administered at 7:21 am on 8/4/16.

Resident 1 is prescribed Metoprolol SUCC ER 50 mg tab, 1 tablet once daily at 8 am. The medication administration record is marked as the medications having been given to the resident as follows:

- 8/1/16 at 6:40 am
- 8/2/16 at 6:55 am
- 8/6/16 at 6:59 am
- 8/7/16 at 6:46 am
- 8/9/16 at 6:38 am.

These times are documented because of staff selecting "administer all" on electronic medication administration record when dispensing 7am medications instead initialing each medication at the actual date and time of their administration.

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.

All medication will be administered and documented at the time it is ordered/dispensed. Resident's metoprolol administration time is now changed to match administration times of other medications at 7am according to the physician's order.

All Med Techs were in-serviced on 8/17/16 in regards to the importance of recording administration times at the correct time medication is given and not using "administer all." All Med Techs were instructed that the medications will be administered within one hour before and one hour after the scheduled administration time.

A medication audit will be completed weekly x4 then monthly by the Director of Wellness to ensure appropriate documentation and administration of medications and will be reported at the Quality Management meeting.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Jennifer Wartel, PCHA*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Jennifer Wartel PC Administrator* Date *8/30/16*

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