



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: April 20, 2017

Ms. Wendy Vennard
Nurse Administrator
Presbyterian Homes, Inc.
1155 Indian Springs Road
Indiana, Pennsylvania 15701

RE: The Village House
License #427290

Dear Ms. Vennard:

As a result of the Department of Human Services' licensing inspection on January 24, 2017, 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 "Brent Sutherland".

Brent Sutherland
Acting Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

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

PCH Name: THE VILLAGE HOUSE		License Number: 42729
Address: 1155 INDIAN SPRINGS ROAD, INDIANA, PA 15701		County: Indiana
Administrator: Wendy Vennard		Region: WEST
Legal Entity Name: PRESBYTERIAN HOMES INC		
Legal Entity Address: 1155 INDIAN SPRINGS ROAD, INDIANA, PA 15701		
Certificate(s) of Occupancy C-1 08/24/1999 Dept of L & I		RECEIVED MAR 17 2017 WEST REGION FIELD OFFICE Human Services Licensing
Staffing Hours		
Resident Support: 0	Total Daily Staff: 19	Waking Staff: 14
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 01/24/2017: Summers, Vicky; Barry, Courtney		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 42 Number of Residents Served: 19 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: 0		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 18 Have Mental Illness: 3 Have an Intellectual Disability: 0 Have a Mobility Need: 0 Have a Physical Disability: 1

*Wendy Vennard
CON Administrator*

Violation Report: 42729 - 01/24/2017 - Summers, Vicky
 PCH Name: THE VILLAGE HOUSE

WEST BRUNSWICK FIELD OFFICE
 Human Services Licensing

1. REGULATION 55 Pa.Code §2600
 2600.63(d) - A staff person who is trained in first aid or certified in obstructed airway techniques or CPR shall provide those services in accordance with their training, unless the resident has a "do not resuscitate" order.

2a. DESCRIPTION OF VIOLATION
 On 1/22/17 at approximately 6:40 a.m., staff person A found resident #1 unresponsive with no pulse in the resident's bathroom. Resident #1 is a full code with no "do not resuscitate" order and staff person A failed to administer CPR.

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.

- a. All staff were educated by the Administrator on the policy for responding to resident care emergencies (see attached)
- b. Each staff member signed that they received the education on the policy for responding to resident care emergencies with the date received (see attached).
- c. This policy will be placed in a reference binder by the administrator for staff to review as needed. The policy will be reviewed with all new staff members during orientation and they will sign that they received the education.
- d. Each staff member will continue to be certified/re-certified in CPR & First Aid yearly or every two years as required. The certification and recertification will be kept in the employee record. The administrator will be responsible for ensuring that all staff have current CPR/First Aid. The CPR/First Aid compliance will be audited by the administrator monthly to ensure full compliance with CPR/First Aid requirements for each staff member. All staff will understand their role in following the code status of each resident during their CPR/First Aid training. The policy for responding to resident care emergencies will be reviewed again at the time of CPR/First Aid training.
- e. All resident code status were reviewed with staff by the Administrator. A resident's with a Full Code Status will have a red dot on the name label of the binding of the resident's chart. This will match a list made for quick reference that has the names of the resident's highlighted in red that are a full code in the first column and the resident's that are a DNR with their names in black in the second column. The administrator will be responsible for updating this list and keeping it current (see attached)
- f. All resident code status are printed on the Medication Administration Record and Physician's orders.

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Wendy Kennard*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Wendy Kennard* Date: *3-14-17*
LPD Administrator

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

The above plan of correction is approved as of 4/11/17
 (Date)

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

Plan of correction implementation status as of 4/11/17
 (Date)

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