



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: March 8, 2018

Mr. Michael K. Beaver,
President
Mechanicsburg Senior Care LLC
4550 Lena Drive, Suite 225
Mechanicsburg, Pennsylvania 17055

RE: Vibra Senior Living
707 Shepherdstown Road
Mechanicsburg, Pennsylvania 17055
Certificate #: 331090

Dear Mr. Beaver:

As a result of the Department of Human Services' licensing inspection on February 16, 2018 of the above facility, a violation with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary was found.

The violation 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,

Gloria Emick
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report: 33109 - 02/18/2018 - Cargile, Kelle
 PCH Name: VIBRA SENIOR LIVING

1. REGULATION 55 Pa.Code §2600

2600.65(a) - Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following:

- (1) Evacuation procedures.
- (2) Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable.
- (3) The designated meeting place outside the building or within the fire-safe area in the event of an actual fire.
- (4) Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable.
- (5) The location and use of fire extinguishers.
- (6) Smoke detectors and fire alarms.
- (7) Telephone use and notification of emergency services.

2a. DESCRIPTION OF VIOLATION

Staff Person A, whose first day of work was 12/1/17, did not receive orientation in general fire safety and emergency preparedness until 12/12/17.

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. What specific changes will be made?
 All new direct care staff, including ancillary staff and volunteer staff will complete orientation in general fire safety and emergency preparedness on first day of orientation.
2. Who will make the change?
 Administrator / Designee
3. When will changes be made?
 Immediately and ongoing.
4. How will changes be made?
 The Administrator / Designee, Orientation Coordinator and Department Head will review & sign off on training.
5. What system will be implemented to insure violation does not happen again?
 See attachment I.

Home has developed a checklist to include all required orientation topics for each new hire, to be signed and dated by Administrator/General Orientation Coordinator/Department Head. Documentation shall be kept by the home.

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

Signature of Legal Entity Representative (Required on EVERY Page) *Beverly Chaisson*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Beverly Chaisson* Date *3.5.2018*

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

The above plan of correction is approved as of 3-08-18 (Date)

Plan of correction implementation status as of 3-08-18 (Date)

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

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