



**pennsylvania**

DEPARTMENT OF HUMAN SERVICES

**MAY 16 2018**

Mr. David Swartley,  
President & CEO  
Moravian Manor, Inc.  
300 West Lemon Street  
Lititz, Pennsylvania 17543

RE: Moravian Manor  
License: 321760

Dear Mr. Swartley:

As a result of the Department of Human Services' Adult Residential annual licensing inspection on April 6, 2018 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.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to [https://www.surveymonkey.com/r/BHSL\\_Inspection](https://www.surveymonkey.com/r/BHSL_Inspection).

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

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

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary



Violation Report: 32178 - 04/06/2018 - Showers, Michael  
 PCH Name: MORAVIAN MANOR

**1. REGULATION 55 Pa.Code §2800**  
 2600.20(b)(6) - If a home is holding more than \$200 for a resident for more than two consecutive months, the administrator shall notify the resident and offer assistance in establishing an interest-bearing account in the resident's name at a local Federally-insured financial institution. This does not include security deposits.

**2a. DESCRIPTION OF VIOLATION**  
 The home holds money for Resident 1 and Resident 2. On 4/6/18, Resident 1 had a balance of \$461.26 and Resident 2 had a balance of \$960.62 in the account. The home has not offered either resident assistance in a establishing an interest bearing account for their funds.

**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 letter. The residents funds account was changed to an interest bearing account on 4/16/18.  
 All residents will receive their portion of the interest.*

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Susan Brennan PCHA, ALA</i>	Date <i>4/16/18</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>4/18/18</u> (Date)	Plan of correction implementation status as of <u>4/18/18</u> (Date)
The above plan of correction was approved by <u>BAS</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: 32178 - 04/06/2018 - Showers, Michael  
 PCH Name: MORAVIAN MANOR

**1. REGULATION 55 Pa.Code §2800**

2800.132(d) - Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.

**2a. DESCRIPTION OF VIOLATION**

The home's designated evacuation time, as established by the fire safety expert, is 9 minutes. During the fire drill held on 02/09/18 at 11:28pm, it took 10 minutes to complete the evacuation.

**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 A repeat drill was conducted on 2/26/18 @ 11:59 pm. The residents were safely evacuated in 8min 9sec which meets our designated evacuation time of 9 min. Two staff persons from skilled nursing were requested to respond to the area per the RN House Supervisor. (Please see attached fire procedure)

② Susan Brennan PCHA, ALA will email the RN House Supervisors an updated resident evacuation needs list when there is a change in the evacuation status of a resident.

\* The administrator will monitor the fire drill records on a monthly basis to identify any problems encountered during the evacuation and implement steps to address all issues that were encountered.

BAS 4/18/18

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative  
 (Required on EVERY Page) Susan Brennan PCHA, ALA

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Susan Brennan PCHA, ALA	Date 4/16/18
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Violation Report: 32176 - 04/06/2018 - Showers, Michael  
 PCH Name: MORAVIAN MANOR

1. REGULATION 55 Pa.Code §2600  
 2600.132(f) - Alternate exit routes shall be used during fire drills.

2a. DESCRIPTION OF VIOLATION

The main entrance of the Hernhut personal care unit was used as the evacuation route during the last eight fire drills held in the months of September of 2017 through March of 2018.

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 Members of the risk management team were notified to place the fire in various locations within PC to utilize alternate evacuation routes.
- ② The risk management team will pre set the fire locations for the year and <sup>SB</sup> communicate these locations to the drill evaluators.
- ③ Susan Brennan PCHA, ALA will monitor the evacuation routes used with each drill and ensure alternate routes are used.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)

*Susan Brennan PCHA, ALA*

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

Susan Brennan PCHA, ALA

Date 4/16/18

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The above plan of correction is approved as of 4/18/18  
 (Date)

Plan of correction implementation status as of 4/18/18  
 (Date)

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

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