



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JUL 03 2018

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

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

Dear Mr. Beaver:

As a result of the Department's Bureau of Human Services Licensing's annual licensing inspection on April 18, 2018, April 19, 2018, and June 7, 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.

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: 33109 - 04/18/2018 - Springs, Israel
 PCH Name: VIBRA SENIOR LIVING

1. REGULATION 55 Pa.Code §2600

2600.65(f) - Training topics for the annual training for direct care staff persons shall include the following:

- (1) Medication self-administration training.
- (2) Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
- (3) Care for residents with dementia and cognitive impairments.
- (4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
- (5) Personal care service needs of the resident.
- (6) Safe management techniques.
- (7) Care for residents with mental illness or mental retardation, or both, if the population is served in the home.

2a. DESCRIPTION OF VIOLATION

During training year 2017, Staff Members A, B, and C did not receive training in the following topics:

Staff Member A: "Care for residents with mental illness or mental retardation..."

Staff Member B: "Care for residents with dementia and cognitive impairments."
 "Care for residents with mental illness or mental retardation..."

Staff Member C: "Care for residents with dementia and cognitive impairments."
 "Safe Management Techniques."

- See Attached - Page 2A

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Amela A. Reiger*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Amela A. Reiger</i>	Date <i>05-08-2018</i>
--	---------------------------

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

The above plan of correction is approved as of 5/14/18
 (Date)

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

Plan of correction implementation status as of 6/27/18
 (Date)

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

Regulation 55 Pa code 2600.(f)

Vibra Senior Living will ensure all personal care staff are receiving the required PA state annual training; a training schedule has been developed by Vibra Healthcare and Medline University. The training module outlines the following courses: The training modules will be implemented and monitored by the Personal Care Home Administrator for compliance.

- | | |
|---|--------|
| ▪ Protecting Resident Rights | 1 Hour |
| ▪ Abuse Prevention in Long Term Care (NCHCA) | 1 Hour |
| ▪ Safe Patient Handling: Lifting | 1 Hour |
| ▪ Controlling Violence in Healthcare and Preventing Elder Abuse | 1 Hour |
| ▪ Standards for Infection Control: An Update for Healthcare Workers(CNA) | 1 Hour |
| ▪ Hand Hygiene: Protecting Yourself and Others (NCHCS) | 1 Hour |
| ▪ Alzheimer's Disease and Dementia Overview (NCHCA) | 1 Hour |
| ▪ Personal Protective Equipment for Nurses and Healthcare Personnel | 1 Hour |
| ▪ CPR, AED, & First Aid Course | 1 Hour |
| ▪ Fire Prevention and Basic Disaster Preparedness in Long Term Care (NCHCA) | 1 Hour |
| ▪ HIPAA: What You Should Know (NAHCA) | 1 Hour |

Staff Member A: receive training for care of residents with mental illness or mental retardation. Training was completed by May 04, 2018 by Personal Care Home Administrator.

Staff Member B: will receive training/education for care of residents with dementia and cognitive impairments. Care for residents with mental illness and retardation. Training was be completed on May 8, 2018. By Personal Care Home Administrator.

Staff Member C: is no longer employed by Vibra Senior Living.

* The administrator will review each staff members training on a quarterly basis to identify any missed trainings and assure that the staff member has received the requisite number of annual training hours.

Documentation of the completed trainings shall be maintained for Dept. review.

BAS 5/14/18

Violation Report: 33109 - 04/18/2018 - Springs, Israel
 PCH Name: VIBRA SENIOR LIVING

1. REGULATION 55 Pa.Code §2600

2600.65(g) - Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:

- (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert.
- (2) Emergency preparedness procedures and recognition and response to crises and emergency situations.
- (3) Resident rights.
- (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101-10225.5102).
- (5) Falls and accident prevention.
- (6) New population groups that are being served at the home that were not previously served, if applicable.

2a. DESCRIPTION OF VIOLATION

During training year 2017, Staff Members A, B, and C did not receive training in the following topics:

Staff Member A: "Fire Safety completed by a fire safety expert or by a staff person trained by a fire safety expert."
 "Emergency preparedness procedures and recognition and response to crises and emergency situations."
 "Resident Rights."
 "The Older Adult Protective Services Act..."

Staff Member B: "Fire Safety completed by a fire safety expert or by a staff person trained by a fire safety expert."
 "Emergency preparedness procedures and recognition and response to crises and emergency situations."
 "Resident Rights."
 "The Older Adult Protective Services Act..."
 "Falls and accident prevention."

Staff Member C: "Resident Rights."
 "The Older Adult Protective Services Act..."

- See Attached - Page 3A

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Pamela A. Peiser*

Date
05-08-2018

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

The above plan of correction is approved as of 5/14/18
 (Date)

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

Plan of correction implementation status as of 6/27/18
 (Date)

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

Regulation Code PA. Code 2600. 65.(g)

Staff person A: received training in Fire Safety, emergency preparedness procedures, and recognition and response to crises and emergency situations, by the Facilities Director who is the designated Fire Safety expert for the community. Training was completed on May 4, 2018.

Staff person A: received training on Resident Rights and The Older Adult Protective Services Act, by the Personal Care Home Administrator on May 4, 2018.

Staff person B: received training in Fire Safety, emergency preparedness procedures, and recognition and response to crises and emergency situations, by the Facilities Director who is the designated Fire Safety expert for the community. Training was completed on May 4, 2018.

Staff person B: received training on Resident Rights and The Older Adult Protective Services Act, on May 8, 2018 by the Personal Care Home Administrator on May 8, 2018

Staff person C: is no longer employed by Vibra Senior Living.

* The administrator will review each staff members training on a quarterly basis to identify any missed trainings and assure that the staff member has received the requisite number of annual training hours.

Documentation of the completed trainings shall be maintained for Dept. review.

BAS 5/14/18

Violation Report: 33109 - 04/18/2018 - Springs, Israel
 PCH Name: VIBRA SENIOR LIVING

1. REGULATION 55 Pa.Code §2600

2600.185(a) - The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

2a. DESCRIPTION OF VIOLATION

During a review of the actual test measurements stored on Resident #1's glucometer as compared with the values documented on the Medication Administration Record (MAR), the following discrepancies were identified:

<u>Date/Time</u>	<u>MAR listing</u>	<u>Glucometer Reading</u>
4/9/18, 11:00 am	131	No test value
4/10/18, 11:00 am	85	87
4/10/18, 4:00 pm	221	86
4/12/18, 4:00 pm	271	236
4/13/18, 11:00 am	200	No test value
4/15/18, 4:00 pm	180	No test value
4/17/18, 11:00 am	143	No test value

See attached Page 4A

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

[Handwritten Signature]

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

Pamela A. Berger

Date
 05-18-2018

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

The above plan of correction is approved as of 5/14/18
 (Date)

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

Plan of correction implementation status as of 6/27/18
 (Date)

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

Regulation PA .Code 2600.185(a)

The staff administering glucose checks will ensure all glucometers are calibrated appropriately to each resident's medical need. [] []

RN's LPN's and Medication Tech's will be in-serviced on safe storage, proper access, security, use and documentation on resident's Medication Administration Record. The staff will be in-serviced by the Director of Nursing for Vibra Health Care by May 31, 2018.

* The Administrator and/or the Director of Nursing shall audit the actual readings on a resident's glucometer as compared with the documented readings on the resident's Medication Administration Record. This shall be done on a weekly basis for the residents who receive blood glucose testing and shall consist of a review of all readings for the previous week. The weekly audits shall occur for a period of 8 weeks, commencing on the date this plan is received. Documentation of the completed audits shall be maintained for Dept. review.

BAS
5/14/18

The home will obtain the instruction manuals for all types of glucometers used by the home to perform blood glucose checks on its residents to ensure that date and time setting instructions are available and accessible by the staff.

BAS 6/27/18

**VIOLATION
PERSONAL CARE HOMES**

Star 2600

Page 1 of 2

PCH Name: VIBRA SENIOR LIVING		Licence Number: 33108
Address: 707 SHEPHARDSTOWN ROAD, MECHANICSBURG, PA 17055		County: Cumberland
Administrator: Pamela Reiger		Region: CENTRAL
Legal Entity Name: MECHANICSBURG SENIOR CARE LLC		
Legal Entity Address: 4600 LENA DRIVE, MECHANICSBURG, PA 17055		
Certificate(s) of Occupancy I-2 12/12/2013 Upper Allen Township		
Staffing Hours Resident Support: 0 Total Daily Staff: 48 Working Staff: 38		
Type of Inspection: Interim - POC BHA Docket Number: Notice: Unannounced		
Reason(s) for inspection(s) Interim		
On-Site Inspections Dates and Department Representatives On-Site 06/07/2018: McCloskey, Jason		
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: 48 Number of Residents Served: 39 Secured Dementia Care Unit in Home: Yes Area: memory care Secured Dementia Unit Capacity, if Applicable: 10 Number of Residents Served in Secured Dementia Care Unit, if applicable: 8 Number of Current Hospice Residents: 4 Number of Hospice Residents in past year: 12		Number of Residents who: Receive Supplemental Security Income: 0 Are 50 Years of Age or Older: 39 Have Mental Illness: 0 Have an Intellectual Disability: 1 Have a Mobility Need: 9 Have a Physical Disability: 2

Violation Report: 33109 - 06/07/2018 - McCloskey, Jason
 PCH Name: VIBRA SENIOR LIVING

1. REGULATION 55 Pa.Code §2600

2600.185(a) - The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

2a. DESCRIPTION OF VIOLATION

The home has failed to implement procedures for the safe use of glucometers as evidenced by:

- The glucometer for Resident 1 is not set with the correct date and time.
- The glucometer for Resident 2 has readings stored on it which are not recorded on the MAR including: 184 on 6/8 at 9:02pm and 209 on 6/4 at 4:30pm. The following readings were stored in the meter, however, were incorrectly documented on the MAR: on 6/8 at 7:21am, a measurement of 154 was stored in the meter and 166 was recorded on the MAR. On 6/3 at 7:23am, a measurement of 183 was stored in the meter and 158 was recorded on the MAR.
- The glucometer for Resident 3 has extra readings stored on it which are not recorded on the MAR including: 155 on 5/28 at 19:01, 98 on 5/28 at 08:18 and 96 on 5/21 at 07:13. In addition, Resident 3 is prescribed *Repaglinide, 0.5mg tablet if blood sugar >150. Take one 9am and 4 pm.* The home has not implemented a consistent method of administration as some staff are performing a third blood sugar check a prior to administration at 9am and other staff are making the determination to administer the medication based on the 6am blood sugar reading.

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 2A

Repeat Violation: No	Date(s) of Previous Violation(s):	
Signature of Legal Entity Representative <i>Michele Knox</i>		
Printed Name and Title of Legal Entity Representative <i>Michele Knox PCHA</i>		Date <i>6-20-18</i>

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

The above plan of correction is approved as of <u>6/27/18</u> (Date)	Plan of correction implementation status as of <u>6/27/18</u> (Date)
The above plan of correction was approved by <u>BAL</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

Page 2A of 2

Regulation 2600.185 a

Resident #1's glucometer was immediately set to the correct date and time.

The administrator/designee will check the readings on each glucometer against the recording on the MAR daily to ensure that the correct readings are documented. Audits will be done for 2 months. Audits will be reviewed in Quality Assurance.

A PRN order will be obtained for all residents with glucometer checks so that if the staff needs to perform a check, it can be documented correctly.

An order has been obtained by the physician to discontinue the 6am glucometer check and make an 8 am check to coincide with the repaglinide 0.5 mg.

All RN's, LPN's, and Medication technicians will be trained on the importance of correctly transferring the glucometer readings to the MAR by June 28, 2018.

*

The home will obtain the instruction manuals for all types of glucometers used by the home to perform blood glucose checks on its residents to ensure that date and time setting instructions are available and accessible by the staff.

BAS 6/27/18

VibraLife Senior Living # 331090

Michele Knox RCHA Michele Knox 6-20-18