



Mailing Date: January 14, 2019

Mr. Joshua Bashore-Steury, LSW, PHCA,
Director of Personal Care
The Mennonite Home
1520 Harrisburg Pike
Lancaster, Pennsylvania 17601

RE: Mennonite Home
Susquehanna 1-3 Floors
Juniata 1-4 Floors
Certificate #: 321780

Mr. Bashore-Steury:

As a result of the Department's Bureau of Human Services Licensing inspection on December 26, 2018 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All violations cited on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Brett Swanger".

Brett Swanger
Human Services Licensing Supervisor

Enclosure
Violation Report

Violation Report: 32178 - 12/26/2018 - Heemer, Laura
PCH Name: MENNONITE HOME SUSQ1 3 4 FL JUNIATA1 4 FL CONESTOGA 1 FL

1. REGULATION 55 Pa.Code §2600
 2600.227(c) - The support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment.

2a. DESCRIPTION OF VIOLATION
 The Resident Assessment and Support Plan for Resident 1, completed 7/27/2018, has not been updated to include information regarding Resident 1 having hallucinations and the dementia related therapy that is being provided to Resident 1.

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.

Please see attached "Appendix A".
 Page 2A

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative (Required on EVERY Page)
Josh Bashore-Stevy, DCHA, LLC

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)
 Josh Bashore-Stevy
 Date 1/11/19

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

The above plan of correction is approved as of <u>1/14/19</u> (Date)	Plan of correction implementation status as of <u>1/14/19</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

Mennonite Home Plan of Correction

Appendix A

1. The staff person responsible for completing and updating Resident Assessment Support Plans for residents residing on Anderson Run and Boyers Run has been changed. Goal Date – 1/18/19.
2. The new staff person will be educated on process for completing a Resident Assessment Support Plan. Goal Date – 1/18/19.
3. Full team education will take place at the monthly team meetings being held on Thursday, 1/17 and Friday, 1/18. This education will include a review of the Resident Assessment Support Plan and ensuring updates are made to the Addendums.
4. A bi-weekly audit will take place for Resident Assessment Support Plans to ensure accurate updates are timely and accurate. This audit will initially take place for three months but can be extended as needed.

*Resident #1's RASP will be updated within 15 days from the receipt of this plan to document the current behaviors of the resident and the services to be provided by the home to assist the resident.
BAS 1/14/19

Joshua Bashore - Steury
Josh Bashore, PLHA, LSW

1/11/19