



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAILING DATE: February 27, 2019

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 inspection on January 28, 2019 and January 29 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: 33109 - 01/02/2019 - Heemer, Laura

PCH Name: VIBRA SENIOR LIVING

1. REGULATION 55 Pa.Code §2600

2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law).

2a. DESCRIPTION OF VIOLATION

On 12/11/2018, a Gabapentin 300 mg capsule was not administered to Resident 1. This medication error was not reported to the Department as required.

On 12/5/2018 and 12/6/2018 Diclofenac Sodium 1% Gel was not administered, at 8am and 8pm, to Resident 1. This medication error was not reported to the Department as Required.

On 1/1/2019 and 1/2/2019 a prescribed multivitamin was not administered to Resident 2. This medication error was not reported to the Department as required.

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.

The medication errors occurred because the medication was not in the facility. The administrator will complete a cart audit on all medication carts to ensure that all medications are in the facility.

All staff that pass medication will be reeducated on reporting procedures when a medication error has occurred. Training will be completed by February 28, 2019

*Medication errors will be reported to the administrator immediately, so that proper notifications can be made. The administrator, and /or designated staff members, will review the Medication Administration Records on a daily basis for a period of two weeks and then on a weekly basis for a period of four weeks to ensure proper reporting has occurred.

BAS 2/15/19

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
(Required on EVERY Page) *Michele Knox*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Michele Knox PCHA* Date *2-14-19*

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

The above plan of correction is approved as of 2/15/19
(Date)

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

Plan of correction implementation status as of 2/27/19
(Date)

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

Violation Report: 33109 - 01/02/2019 - Heemer, Laura
PCH Name: VIBRA SENIOR LIVING

1. REGULATION 55 Pa.Code §2600
 2600.42(b) - A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

2a. DESCRIPTION OF VIOLATION
 In December 2018, Resident 1 reported that Staff Person A was being rough and in a hurry when assisting Resident 1 during transfer. Resident 1 told Staff Person A to be gentle but states Staff Person A continued to hurt Resident 1 which resulted in bruising to Resident 1's leg. A few days after this incident, Staff Person A forced Resident 1 onto a standing scale despite Resident 1 refusing to agree to being weighed on a standing scale. Staff person A grabbed Resident 1 around the waist and neck to place Resident 1 on the scale, causing pain 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.

Staff person A was immediately suspended when the allegation was told to the facility. The facility conducted an internal investigation and staff person A was terminated from their position. All Personal Care staff was educated on Resident's Rights and OAPSA and how to report abuse. Training was completed on February 8, 2019.

*The resident council meetings will be used to discuss staff treatment during care and identify any concerns the residents may have.
 BAS 2/15/19

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Violation Report: 33109 - 01/02/2019 - Heemer, Laura

PCH Name: VIBRA SENIOR LIVING

1. REGULATION 55 Pa.Code §2600

2600.51 - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (OAPSA) (35 P.S. §§ 10225.101-10225.5102) and 6 Pa.Code Chapter 15 (relating to protective services for older adults).

2a. DESCRIPTION OF VIOLATION

Staff Person A was hired on 9/24/2018. The record for Staff Person A indicates Staff Person A was not a resident of Pennsylvania for two consecutive years before Staff Person A was hired. The home did not perform a Federal Bureau of Investigation criminal record check for Staff Person A in accordance with the Older Adult Protective Services Act.

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.

Staff person A is no longer employed at the facility.

An audit of all personal care staff files will be completed to ensure that all criminal background check and FBI criminal check have been completed as warranted.

The Human Resources staff shall be reeducated on Regulation 2600.51 and the importance of having a FBI criminal background check done if the potential employee has not lived in the state of Pennsylvania for 2 years prior to applying for employment. Education will be completed by February 28, 2019.

*All FBI criminal background checks will be obtained through contact with the Pennsylvania Department of Aging.

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Violation Report: 33109 - 01/02/2019 - Heemer, Laura
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1. REGULATION 55 Pa.Code §2600
 2600.187(b) - The information in § 2600.187(a)(13) and § 2600.187(a)(14) shall be recorded at the time the medication is administered.

2a. DESCRIPTION OF VIOLATION
 On 12/13/2018, the 8pm administration of Brimonidine Tartrate 0.2% drops and Prosource No Carb 4's Lac/Glu Free 15 G-60/30 Liquid, 30 ML were not initialed on the Medication Administration Record of Resident 1 by the staff person who administered the medication.
 On 12/28/2018, the 8am administration of Atorvastatin Calcium 20 mg Tab was not initialed on the Medication Administration Record of Resident 1 by the staff person who administered the medication.
 On 1/15/2019 the 8am administration of Namenda was not initialed on the Medication Administration Record of Resident 2 by the staff person who administered the medication.

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.

All staff passing medication will review the MAR after each medication pass to ensure they have correctly completed the task of signing off all medications given.

The Director of Wellness/designee will review the MAR daily to make sure that all medications have been properly documented.

All staff passing medications will be reeducation on the proper procedure for passing medication and documentation. Training will be completed by February 28, 2019

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Violation Report: 33109 - 01/02/2019 - Heemer, Laura
PCH Name: VIBRA SENIOR LIVING

1. REGULATION 55 Pa.Code §2600
 2600.187(d) - The home shall follow the directions of the prescriber.

2a. DESCRIPTION OF VIOLATION
 On 12/11/2018, the prescribed Gabapentin 300 mg capsule was not administered to Resident 1.
 On 12/5/2018 and 12/6/2018 the prescribed Diclofenac Sodium 1% Gel was not administered at 8am and 8pm to Resident 1.
 On 1/1/2019 and 1/2/2019 the prescribed multivitamin was not administered to Resident 2.

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.

The medication errors occurred because the medication was not in the facility. The administrator will complete a cart audit on all medication carts to ensure that all medications are in the facility.

All staff that administer medications will be reeducated on policies and procedures of following the directions on the prescriber in medication administration. Training will be completed by February 28, 2019

* The administrator will review the current policies and procedures for ordering/reordering medications, and will develop and implement methods to address any issues found that resulted in the medications not being available. Staff will be educated on any changes to the policy within 5 days of the change. The administrator, and /or designated staff members, will review the Medication Administration Records on a daily basis for a period of two weeks and then on a weekly basis for a period of four weeks to assess the efficacy of the policy changes, if changes were made and ensure that medications are available for administration.

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Violation Report: 33109 - 01/02/2019 - Heemer, Laura

PCH Name: VIBRA SENIOR LIVING

1. REGULATION 55 Pa.Code §2600

2600.188(b) - A medication error shall be immediately reported to the resident, the resident's designated person and the prescriber.

2a. DESCRIPTION OF VIOLATION

On 12/11/2018, a prescribed Gabapentin 300 mg capsule was not administered to Resident 1. This medication error was not reported to the Resident, the Resident's designated person, and the prescriber as required.
 On 12/5/2018 and 12/6/2018 prescribed Diclofenac Sodium 1% Gel was not administered at 8am and 8pm to Resident 1. This medication error was not reported to the Resident, the Resident's designated person, and the prescriber as Required.
 On 1/1/2019 and 1/2/2019 a prescribed multivitamin was not administered to Resident 2. This medication error was not reported to the Resident, the Resident's designated person, and the prescriber as required.

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.

2600.188b

The medication errors occurred because the medication was not in the facility. The administrator will complete a cart audit on all medication carts to ensure that all medications are in the facility.

All staff that administer medications will be reeducated on the proper procedure pertaining to notifying the resident, the designated person, and the prescriber if a medication is not given. Education will be completed by February 28, 2019.

*Medication errors will be reported to the administrator immediately, so that proper notifications can be made. The administrator, and /or designated staff members, will review the Medication Administration Records on a daily basis for a period of two weeks and then on a weekly basis for a period of four weeks to ensure proper reporting has occurred.

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Violation Report: 33109 - 01/02/2019 - Heemer, Laura
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1. REGULATION 55 Pa.Code §2600

2600.190(a) - A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

2a. DESCRIPTION OF VIOLATION

The staff record for Staff Person B does not contain documentation of Staff Person B having successfully completed the Department approved medications administration course. According to the Medication Administration records Staff Person B administered medications in the home at 8am on 1/1/19 through 1/6/19, 1/11/19, 1/16/19, 1/18/19, 1/23/19, and 1/25/19.

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.

Staff person B was immediately removed from passing medications until the staff person can retake the medication training course.

The Administrator/designee will review all medication training documentation for compliance on new hires as well as current staff to verify initial and annual trainings and observations are completed and current.

*Trainings for the medication administration staff will be reviewed during each quality management meeting to ensure that the training requirements are being maintained.

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