



July 26, 2019

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

RE: Moravian Manor
Certificate #: 321760

Dear Mr. Swartley:

As a result of the Department's Bureau of Human Services Licensing annual inspection on April 2, 2019 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 citations specified 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.

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 that reads "Carolyn K. Ellison".

Carolyn K. Ellison,
Deputy Secretary, Office of Administration
Shared Services for Health and Human Services

Enclosure
Violation Report

Violation Report: 32176 - 04/02/2019 - OPake, Hope

PCH Name: MORAVIAN MANOR

1. REGULATION 55 Pa.Code §2600

2600.65(b) - Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following:

- (1) Resident rights.
- (2) Emergency medical plan.
- (3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P.S. §§ 10225.101-10225.5102).
- (4) Reporting of reportable incidents and conditions.

2a. DESCRIPTION OF VIOLATION

Staff Member A, hired on 8/7/2017, did not have initial training in resident rights.

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 orientation checklist was revised 4/10/19 to capture the required initial and 40 hour training topics (see attached document). Susan Brennan PCHA, ALA revised the checklist. Human Resources staff was trained on the required topics for new employees and the time frame of completion. The revised checklist was implemented 4/10/19 and will be used for all new employees. The Human Resources staff is responsible for utilizing this form moving forward.

Staff training needs will be addressed at the home's periodic quality management reviews. GE, 7/19/19

for current staff who are working in skilled nursing and transfer to Personal Care, Susan Brennan PCHA, ALA, will complete the ^{sb}initial training and 40 hour training and document on form specifically created to capture these trainings (see attached). Susan Brennan PCHA, ALA will be responsible for the trainings and the documentation. Procedure was implemented 4/10/19.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Susan Brennan

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

Susan Brennan CN, PCHA, ALA

Date 5/13/19

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

The above plan of correction is approved as of 7/19/19
(Date)

Plan of correction implementation status as of 7/19/19
(Date)

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

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

Violation Report: 32176 - 04/02/2019 - OPake, Hope

PCH Name: MORAVIAN MANOR

1. REGULATION 55 Pa.Code §2600

2600.132(g) - Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

2a. DESCRIPTION OF VIOLATION

Sleeping hours fire drills were held with additional staff present as follows:

- 2/25/2019 at 11:01 pm with 6 staff. On average, only one direct care staff is scheduled from 11:00 pm to 7:00 am
- 8/22/2018 at 5:07 am with 5 staff. On average, only one direct care staff is scheduled from 11:00 pm to 7:00 am.

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.

A fire drill was held on 4/11/19 @ 11:20pm. One staff person was scheduled and safely evacuated the residents in the specified amount of time.

11-7 staff was educated by Susan Brennan PCHA, ALA on 4/8/19 that only the scheduled staff in Personal Care may participate in the fire drills. Skilled nursing may not participate.

See attached fire drill log, and education.

Susan Brennan PCHA, ALA will be responsible for enforcing this regulation moving forward.

The Administrator will ensure that adequate staffing is in place to assist personal care residents in safely evacuating during all fire drills. The monthly fire drills will be discussed at the home's periodic quality management reviews. GE, 7/19/19

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Susan Brennan

Printed Name and Title of Legal Entity Representative

(Required on EVERY Page) *Susan Brennan LPA, PCHA, ALA*

Date *5/13/19*

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11-7 Fire Drills

4/8/2019

Effective immediately, only the scheduled staff in Personal Care on 11-7 shift, are to participate in fire drills. The skilled nursing staff may not come over to assist.

See regulation 2600.132(g) below:

Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.


Anna Lutz

Violation Report: 32176 - 04/02/2019 - OPake, Hope
 PCH Name: MORAVIAN MANOR

1. REGULATION 55 Pa.Code §2600

2600.162(c) - Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

2a. DESCRIPTION OF VIOLATION

Menus in the dining room were not posted one week in advance.

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.

Violation was corrected immediately and required menus were posted 4/2/19. Susan Brennan PCHA, ALA will check daily for posted menus. Bill Kehler, General Manager Dining Services, is responsible for ensuring his team posts the menus, & weeks always posted.

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Susan Brennan RN, PCHA, ALA* Date *5/13/19*

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Violation Report: 32176 - 04/02/2019 - OPake, Hope
 PCH Name: MORAVIAN MANOR

1. REGULATION 55 Pa.Code §2600

2600.187(a) - A medication record shall be kept to include the following for each resident for whom medications are administered:

- (1) Resident's name.
- (2) Drug allergies.
- (3) Name of medication.
- (4) Strength.
- (5) Dosage form.
- (6) Dose.
- (7) Route of administration.
- (8) Frequency of administration.
- (9) Administration times.
- (10) Duration of therapy, if applicable.
- (11) Special precautions, if applicable.
- (12) Diagnosis or purpose for the medication, including pro re nata (PRN).
- (13) Date and time of medication administration.
- (14) Name and initials of the staff person administering the medication.

2a. DESCRIPTION OF VIOLATION

The medication administration record for Resident #1 did not include the name of the person who administered 8 pm medications on 3/17/19.

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.

Susan Brennan PCHA, ALA re-educated the MedTechs on the proper procedure for administering medications with the emphasis on documentation. See attached education. The Med Techs were educated on checking for completion of the medication pass after each scheduled time and at the end of their shift on 4/5/19.

The 11-7 Charge Nurses will do a weekly audit of the MARs. Susan Brennan PCHA, ALA will review the audits weekly. The first MAR audit was completed 5/3/19.

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Susan Brennan LPN, PCHA, ALA* Date *5/13/19*

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