



September 12, 2019

Ms. M. Sue Verdegem  
Chief Executive Officer  
United Zion Retirement Community, Inc.  
722 Furnace Hills Pike  
Lititz, Pennsylvania 17543

RE: United Zion Retirement Community  
Certificate #: 321810

Dear Ms. Verdegem:

As a result of the Department's Bureau of Human Services Licensing's annual licensing inspection on August 8, 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](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 "Kevin Hancock".

Kevin Hancock  
Deputy Secretary  
Office of Long-term Living

Enclosure  
Violation Report

## Violation Report

### Facility Information

Name: UNITED ZION RETIREMENT COMMUNITY

License Number: 32181

Address: 722 FURNACE HILLS PIKE,, LITITZ, PA 17543

County: LANCASTER

Region: CENTRAL

### Administrator

Name: Jodi Reynolds

Phone: 7176278409

Email:

### Legal Entity

Name: UNITED ZION RETIREMENT COMMUNITY, INC.

Address: 722 FURNACE HILLS PIKE, LITITZ, PA, 17543

### Certificate(s) of Occupancy

Type: C-2 LP

Date: 09/22/1995

Issued By: L&I

### Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 24

Waking Staff: 18

### Inspection

Type: Full

BHA Docket #:

Notice: Unannounced

Reason: Renewal

### Inspection Dates and Department Representative

08/08/2019 - On-Site: Israel Springs, Doug Hoover

### Resident Demographic Data as of Inspection Dates

#### General Information

License Capacity: 49

Residents Served: 24

#### Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

#### Hospice

Current Residents: 2

#### Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 24

Diagnosed with Mental Illness: 1

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 0

Have Physical Disability: 0

65f - Training Topics

Regulations

2600.

- 65.f. Training topics for the annual training for direct care staff persons shall include the following:
  - 1. Medication self-administration training.

Description of Violation

Direct Care Staff Person A did not receive annual "Medication self-administration training" during training year 2018.

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.)

When developing the training plan annually, a spreadsheet/checklist of accompanying regulations will be used in comparison to make sure all training criteria is met annually.

2019 training plan completed in January was shown to department representatives at time of inspection and in compliance.

Effective 1/2019

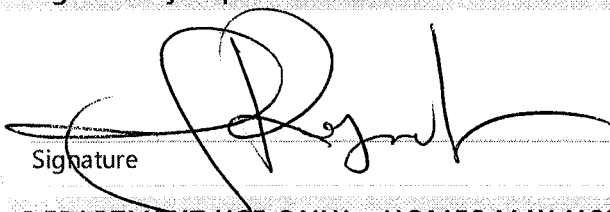
Annual checklists for personal care and ancillary staff have been implemented for review during the last quarter of our training year.

They will be compared with in-person trainings, in addition to our computerized training system to ensure all regulatory criteria has been met.

If criteria or training guidelines have not been met at this time, staff member will be notified to complete necessary training, prior to end of the training year.

Effective 8/2019

Legal Entity Representative



Signature

Jamie Reynolds, Director of Personal Care & Independent Living 8/15/2019  
 Printed Name and Title Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 8/16/2019 Plan of correction implementation status as of 8/16/2019  
 (Date) (Date)

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

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

85a - Sanitary Conditions

Regulations

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

The inside hinge for the icemaker door cover had a brown sticky substance on it.

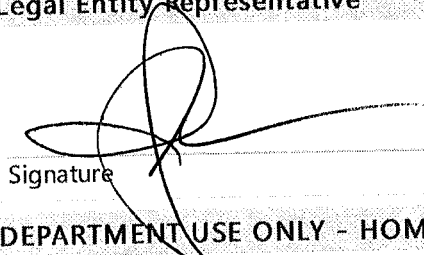
Plan of Correction (POC)

(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.)

Food and Nutrition staff will clean ice machine, specifically the hinge weekly.  
A sign-off sheet will be placed at the ice machine to ensure completion of cleaning.  
Commercial cleaning company will come out [at least] bi-annually to clean and service the ice machine.

Effective 8/13/2019

Legal Entity Representative



Jamie Reynolds, Director of Personal Care & Independent Living 8/15/2019  
Printed Name and Title Date

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(Date) (Date)

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(Initials)  Partially Implemented - Adequate Progress  
 Partially Implemented - Inadequate Progress  
 Not Implemented

105g - Lint Removal and Duct Cleaning

Regulations

2600.

105.g. To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

Description of Violation

The "Dexter" commercial dryer had an accumulation of lint in the back corners and front of the bottom lint door. Lint was also present on the hinges of the door.

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.)

Laundry staff will clean the lint trap after each use.  
Twice daily laundry staff will sweep out the bottom compartment using a broom/shop vac and sign a sheet upon completion of cleaning the compartment.  
Monthly maintenance staff shall clean the area around the dryers, using the work order system.  
Semi-annual cleaning of the ductwork shall be performed by a commercial cleaner.  
Director of Environmental Services shall review the documentation signed by laundry staff and work orders used by the maintenance staff for three months and share information during Quality Assurance meeting.

Effective: 8/12/2019

Legal Entity Representative



Jamie Reynolds, Director of Personal Care & Independent Living 8/15/2019  
Printed Name and Title Date

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