



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Mailed: October 15, 2019

Mr. Kevin McCollum
Vice President
HSL Ephrata Subtenant LLC
C/O ReNew Reit
One SeaGate, Suite 1500
Toledo, OH 43604

RE: Keystone Villa at Ephrata
100 North State Street
Ephrata, Pennsylvania 17522
License #: 334660

Dear Mr. McCollum:

As a result of the Department's Bureau of Human Services Licensing inspection on August 29, 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 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, appearing to read "Brett Swanger".

Brett Swanger
Human Services Licensing Supervisor

Enclosure
Violation Report

Violation Report

Facility Information

Name: *KEYSTONE VILLA AT EPHRATA*

License Number: *33466*

Address: *100 NORTH STATE STREET,, EPHRATA, PA 17522*

County: *LANCASTER*

Region: *CENTRAL*

Administrator

Name: *Michele Glover*

Phone: *717-738-5800*

Email:

Legal Entity

Name: *HSL EPHRATA SUBTENANT LLC*

Address: *ONE SEAGATE, SUITE 1500, C/O RENEW REIT ATTN LEGAL, TOLEDO, OH, 43604*

Certificate(s) of Occupancy

Type: *1-2*

Date:

Issued By:

Staffing Hours

Resident Support Staff: *0*

Total Daily Staff: *108*

Waking Staff: *81*

Inspection

Type: *Partial*

BHA Docket #:

Notice: *Unannounced*

Reason: *Complaint*

Inspection Dates and Department Representative

08/29/2019 - On-Site: Jason McCloskey

08/30/2019 - Off-Site: Jason McCloskey

09/03/2019 - Off-Site: Jason McCloskey

09/06/2019 - Off-Site: Jason McCloskey

09/13/2019 - Off-Site: Jason McCloskey

09/18/2019 - Off-Site: Jason McCloskey

10/04/2019 - Off-Site: Jason McCloskey

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *100*

Residents Served: *83*

Secured Dementia Care Unit

In Home: *Yes*

Area: *Evergreen*

Capacity: *34*

Residents Served: *24*

Hospice

Current Residents: *1*

Resident Demographic Data as of Inspection Dates *(continued)*

Number of Residents Who:

Receive Supplemental Security Income: 0
Diagnosed with Mental Illness: 0
Have Mobility Need: 25

Are 60 Years of Age or Older: 83
Diagnosed with Intellectual Disability: 0
Have Physical Disability: 3

42b - Abuse

Regulations

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

Resident 1 had two gold rings stolen by Staff Person A.

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.)

What:

On 7-16-19 Staff Person A was arrested and removed from Keystone Villa at Ephrata for stealing. On 8-5-19 it was reported to [redacted] Executive Director at Keystone Villa that a resident was missing two gold rings. After an investigation performed by the Community, Michele Glover reported this information to Detective [redacted] with the Ephrata Police Department who was handling this case.

Who:

Business Office Manager will continue to perform criminal background checks for all new employees and comply with all requirements of federal, state and local laws pertaining to background checks.

How:

Executive Director and Business Office Manager will review every new employee background check together and determine eligibility for employment.

Ongoing:

Executive Director or Designee will be responsible for informing each new resident during the move-in process that a lockable drawer is provided by the Community, or a lock box can be provided upon request. In addition, this is covered in section 13.1 Personal and Other Property in the Resident Agreement. (Attachment A)

On 8-28-19 [redacted] LTC Ombudsman from Lancaster Office of Aging came to building to do a presentation on Resident Rights for staff. (Attachment B). We will continue to train and educate all staff on Resident Rights by scheduling additional presentations with Office of Aging and Relias.

Legal Entity Representative

Michele M. Glover
Signature

Michele M. Glover, Ex. Dir. 10-11-19
Printed Name and Title Date

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

The above plan of correction is approved as of 10/15/2019 Plan of correction implementation status as of 10/15/2019
(Date) (Date)

The above plan of correction was approved by BAS Fully Implemented
(Initials) Partially Implemented - Adequate Progress
 Partially Implemented - Inadequate Progress
 Not Implemented

187d - Follow Prescriber's Orders

Regulations

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident 1 was prescribed Ropinirole 0.25 mg tablets to be administered three times daily. This medication was not administered to the resident from 7/28/19 at 1:00pm through 8/8/19.

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.)

What:

Resident #1 was new to facility, moved-in 7-18-19 and switched to the CRNP that visits our Community. This CRNP prescribed Ropinirole 0.25 mg tablets to be administered three times daily. Resident #1's wife, who is also POA, was adamant that he does not receive this medication. Requested a D/C order from physician and stopped administering the medication.

Who:

Director of Health & Wellness and all med-techs will be re-educated on the importance of the discharge order from physician. If a change in medication is requested by anyone other than resident's physician, we must have a verbal/written order signed from physician before change is implemented.

How:

Director of Health & Wellness or LPN will fax all orders over to physician and are responsible for collecting the signed written order back from physician. The Director of Health & Wellness or LPN will verify that all written orders have been received daily. Director of Health & Wellness or LPN will personally call physician with any outstanding orders.

Ongoing:

Executive Director or designee will monitor missed medication report from Communities electronic medication administration recording system weekly (Attachment A) to assure ongoing compliance as well as review report at QI meeting.

Legal Entity Representative

Michael M. Glover
Signature

Michael M. Glover, Ex Dir. 10-11-19
Printed Name and Title Date

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