



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAILING DATE: November 5, 2019

Ms. Debra Enders,
Administrator
The Vineyard Personal Care Home, Inc.
3030 Colombia Avenue
Lancaster, Pennsylvania 17603

RE: The Vineyard Personal Care Home
License #:325030

Dear Ms. Enders:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Office of Long-term Living) review on October 2, 2019 of the above facility, we have determined that your submitted plan of correction is:

Fully implemented and in compliance. Continued compliance must be maintained.

If you need assistance, please contact me at 717-418-9656 or email:
bswanger@pa.gov.

Sincerely,

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

Brett Swanger
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: THE VINEYARD PERSONAL CARE HOME

License Number: 32503

Address: 3030 COLUMBIA AVENUE, LANCASTER, PA 17603

County: LANCASTER

Region: CENTRAL

Administrator

Name: Debra Enders

Phone: 7172992919

Email: Vineyardpch@gmail.com

Legal Entity

Name: THE VINEYARD PERSONAL CARE HOME INC

Address: 3030 COLUMBIA AVENUE, LANCASTER, PA, 17603

Certificate(s) of Occupancy

Type: C-2 LP

Date: 04/11/2003

Issued By: L&I

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 37

Waking Staff: 28

Inspection

Type: Full

BHA Docket #:

Notice: Unannounced

Reason: Renewal

Inspection Dates and Department Representative

10/02/2019 - On-Site: Israel Springs, Hope O'pake

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 42

Residents Served: 37

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 30

Are 60 Years of Age or Older: 25

Diagnosed with Mental Illness: 37

Diagnosed with Intellectual Disability: 7

Have Mobility Need: 0

Have Physical Disability: 0

185a - Implement Storage Procedures

Regulations

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

On 9/1/19 at 7:00 am, the Medication Administration Record (MAR) for Resident #1 documented a measurement of 181. This measurement was not, was not found in the memory of the resident's glucometer at this date and time.

On 9/2/19 at 7:54 pm, the glucometer for Resident #1 had a measurement of 296 stored in it's memory, but a measurement of 286 was documented in the resident's MAR.

Plan of Correction (POC)

Accurate documentation is critical in communicating to health professionals what is observed at the home. In this instance documentation was not accurate.

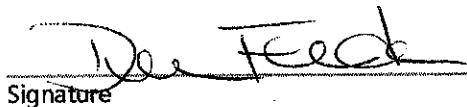
While the violation of 9/1/19 cannot be recreated to determine the cause, the violation of 9/2/19 was an incorrect manual recording. The accucheck recording sheet was reviewed and found to be clear and reliable. The cause was human error. All staff with a role in accuchecks were notified on 10/2/19, the inspection date, of these two errors and instructed to double check all documentation.

The accucheck sheets which are attached to the MAR have been modified by adding a weekly verification sign off spot. This spot is called "AUDIT METER". It is a row after the 7th, 14th, 21st and 28th of each month. There is an end of month signoff for last days of month and overall verification that audits were completed. Office staff will cross reference the written recording against the accucheck machine and sign. Any discrepancy will be promptly researched and addressed to staff.

October and November accucheck sheets attached.

*Documentation for the completed monthly audit of October 2019 will be submitted to the Department. BAS 10/17/19

Legal Entity Representative


Signature

Debra Enders
Printed Name and Title

10/18/19
Date

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The above plan of correction is approved as of 10/17/2019 Plan of correction implementation status as of 11/4/2019
(Date) Implemented (Date)

The above plan of correction was approved by BAS
(Initials) Not Implemented