



Sent via e-mail [dshearer@londonderryvillage.org]

MAILING DATE: April 24, 2020

Ms. Diana Shearer, LPN  
Personal Care Home Administrator  
Lebanon Valley Brethren Home  
1200 Grubb Street  
Palmyra, Pennsylvania 17078

RE: Lebanon Valley Brethren Home  
Certificate #: 342960

Dear Ms. Shearer:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Office of Long-term Living) review on March 9, 2020, of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

*Gloria Emick*

Gloria Emick  
Human Services Licensing Supervisor

Enclosure  
Licensing Inspection Summary

# Violation Report

## Facility Information

Name: *LEBANON VALLEY BRETHERN HOME*  
Address: *1200 GRUBB STREET, PALMYRA, PA 17078*  
County: *LEBANON* Region: *CENTRAL*

License Number: *34296*

## Administrator

Name: *Diana Shearer* Phone: *7178385406* Email: *dshearer@londonderryvillage.org*

## Legal Entity

Name: *LEBANON VALLEY BRETHERN HOME*  
Address: *1200 GRUBB STREET, PALMYRA, PA, 17078*

## Certificate(s) of Occupancy

Type: *C-2 LP* Date: *05/08/1990* Issued By: *L&I*

## Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *29* Waking Staff: *22*

## Inspection

Type: *Full* BHA Docket #: Reason: *Renewal* Notice: *Unannounced*

## Inspection Dates and Department Representative

*03/09/2020 - On-Site: Douglas Hoover, Dale Rosenblat*

## Resident Demographic Data as of Inspection Dates

### General Information

License Capacity: *58* Residents Served: *29*

### Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

### Hospice

Current Residents: *0*

### Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *29*  
Diagnosed with Mental Illness: *2* Diagnosed with Intellectual Disability: *0*

25b - Contract Signatures

Regulations

2600.

25.b. The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

Description of Violation

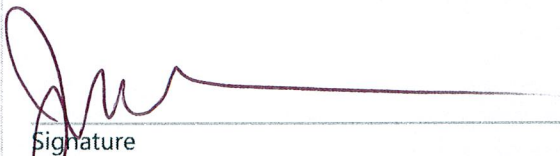
The contract, dated 9/19/2018, for Resident #1, admitted on 9/22/2018, was not signed by the payer.  
The contract, dated 9/7/2018, for Resident #2, admitted on 9/22/2018, was not signed by the resident.  
The contract, dated 9/19/2019, for Resident #3, admitted on 9/20/2019, was not signed by the resident.

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 above 3 contracts have all been signed by the payer and/or President as per the regulation.  
- the PC administrator will be educated on the regulations cited  
- the PC administrator will monitor compliance  
Date of completion & compliance 4/3/20

Legal Entity Representative



Signature

Jen Ginner VP of Health Service 4/3/20

Printed Name and Title

Date

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

The above plan of correction is approved as of

4/22/20  
(Date)

Plan of correction implementation status as of

4/22/20  
(Date)

XX  Implemented  
 Not Implemented

The above plan of correction was approved by

GE  
(Initials)

133.1 - Exit Signs

Regulations

2600.

133.1. Exit Signs - The following requirements apply for a home serving nine or more residents: Signs bearing the word "EXIT" in plain legible letters shall be placed at all exits.

Description of Violation

There were no exit signs posted for the exit door in the lounge outside of the dining room and the exit door in the dining room.

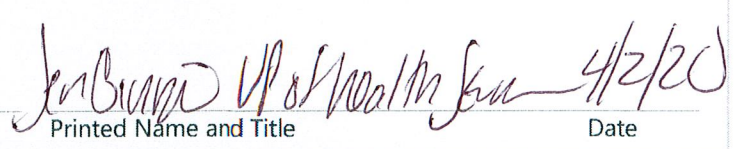
Plan of Correction (POC)

(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 door in the Dining room had an exit sign placed  
The door in the lounge is not an exit door.  
Maintenance will spray the door glass  
so it does not appear as an exit door.  
PC administrator educated on regulations  
PC administrator to monitor compliance  
Date of compliance 4/3/20

Legal Entity Representative

  
Signature

  
Printed Name and Title Date

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The above plan of correction is approved as of 4/22/20 Plan of correction implementation status as of 4/22/20  
(Date) (Date)  
XX  Implemented  
The above plan of correction was approved by GE  Not Implemented  
(Initials)