

Department of Human Services
Bureau of Human Service Licensing

September 1, 2022

[REDACTED]
ZERBE SISTERS NURSING CENTER INC
2499 ZERBE ROAD
NARVON, PA, 17555

RE: ZERBE SISTERS NURSING CENTER
2499 ZERBE ROAD
NARVON, PA, 17555
LICENSE/COC#: 32237

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/03/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

[REDACTED]

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC

Facility Information

Name: ZERBE SISTERS NURSING CENTER License #: 32237 License Expiration: 06/17/2023
Address: 2499 ZERBE ROAD, NARVON, PA 17555
County: LANCASTER Region: CENTRAL

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: ZERBE SISTERS NURSING CENTER INC
Address: 2499 ZERBE ROAD, NARVON, PA, 17555
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 10/19/1996 Issued By: Labor & Industry

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 25 Waking Staff: 19

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
Reason: Renewal Exit Conference Date: 08/03/2022

Inspection Dates and Department Representative

08/03/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 28 Residents Served: 24

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 1 Are 60 Years of Age or Older: 24
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 1
Have Mobility Need: 1 Have Physical Disability: 1

Inspections / Reviews

08/03/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 08/15/2022

08/15/2022 - POC Submission

Inspections / Reviews *(continued)*

Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *08/22/2022*

08/16/2022 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *08/23/2022*

09/01/2022 - Document Submission

Reviewer: [REDACTED] Follow-Up Type: *Not Required*

25b - Contract Signatures

1. Requirements

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 resident-home contract, dated [REDACTED], for Resident #1 was signed by the resident and the personal care home. However, it was not signed by the "designated person" indicated in the contract.

Plan of Correction

Accept

- 1.) Contract was sent to designated person for signature. [REDACTED]
- 2.) All other contracts were audited and sent out if missing signatures. Audit done 08/05/22.
- 3.) Education provided to all staff members who assist with contract signings. Email chain sent.
- 4.) Audit will be completed by PCHA weekly x4 then monthly x6. Audits begin 08/08/22

Completion Date: 08/15/2022

Document Submission

Implemented

- 1.) Contract was sent to designated person for signature. [REDACTED]
- 2.) All other contracts were audited and sent out if missing signatures. Audit done 08/05/22.
- 3.) Education provided to all staff members who assist with contract signings. Email chain sent.
- 4.) Audit will be completed by PCHA weekly x4 then monthly x6. Audits begin 08/08/22

94b - Non-Skid Surface

1. Requirements

2600.

94.b. Interior stairs, exterior steps and ramps must have nonskid surfaces.

Description of Violation

Five (5) of the seven (7) exterior steps leading from the exit door in the "long hall" to the grass do not have any type of non-skid surface.

Plan of Correction

Accept

- 1.) Steps to be made non-skid by 8/9/22.
- 2.) Education provided to maintenance in regards to non-skid surfaces. Record of training sheet completed.
- 3.) Audit to be done by PCHA weekly x4 weeks then quarterly by Safety Committee. Audit beginning 08/08/22.

Completion Date: 08/15/2022

Document Submission

Implemented

- 1.) Steps to be made non-skid by 8/9/22.
- 2.) Education provided to maintenance in regards to non-skid surfaces. Record of training sheet completed.
- 3.) Audit to be done by PCHA weekly x4 weeks then quarterly by Safety Committee. Audit beginning 08/08/22.

190c - Record of Training

1. Requirements

2600.

190c - Record of Training (continued)

190.c. A record of the training shall be kept including the staff person trained, the date, source, name of trainer and documentation that the course was successfully completed.

Description of Violation

The home's medication administration training record for staff persons A and B does not include the successful completion of a Department-approved medications administration course that includes the passing of the Department's performance-based competency test.

Plan of Correction**Accept**

- 1.) Attempted to obtain missing information from previous facilities. Attempts were unsuccessful. Both staff members A and B are no longer employed at Zerbe.
- 2.) Audit of other MT files was completed, 08/05/22. 1 other staff member (prn) was out of compliance-will be retested prior to passing medications.
- 3.) Audit will be done by PCHA weeklyx4 then monthlyx6 to ensure initial paperwork is available. Audit began 08/08/22

Completion Date: 08/15/2022

Document Submission**Implemented**

- 1.) Attempted to obtain missing information from previous facilities. Attempts were unsuccessful. Both staff members A and B are no longer employed at Zerbe.
- 2.) Audit of other MT files was completed, 08/05/22. 1 other staff member (prn) was out of compliance-will be retested prior to passing medications.
- 3.) Audit will be done by PCHA weeklyx4 then monthlyx6 to ensure initial paperwork is available. Audit began 08/08/22

227d - Support Plan Medical/Dental**1. Requirements**

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

Resident #1 has a physician's order for a [REDACTED] " to assist with [REDACTED]. However, The assessment for Resident #1, [REDACTED] does not indicate that the resident has a need for [REDACTED]. Further, the resident's support plan, dated [REDACTED] does not document how this need will be met.

Plan of Correction**Accept**

- 1.) Resident #1's RASP was updated [REDACTED]
- 2.) Audit was completed 08/05/22 to ensure all other [REDACTED] " were appropriately documented in RASP.
- 3.) PCHA will audit RASPs qwk x4 then monthly x6. Audit began 08/08/22.

Completion Date: 08/15/2022

Document Submission**Implemented**

- 1.) Resident #1's RASP was updated [REDACTED]
- 2.) Audit was completed 08/05/22 to ensure all other [REDACTED] " were appropriately documented in RASP.
- 3.) PCHA will audit RASPs qwk x4 then monthly x6. Audit began 08/08/22.