

Department of Human Services
Bureau of Human Service Licensing

September 16, 2022

[REDACTED]
UNITED CHURCH OF CHRIST HOMES INC
30 NORTH 31ST STREET
CAMP HILL, PA, 17011

RE: EPHRATA MANOR
99 BETHANY ROAD
EPHRATA, PA, 17522
LICENSE/COC#: 32188

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/31/2022 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: *EPHRATA MANOR* License #: *32188* License Expiration: *06/24/2023*
Address: *99 BETHANY ROAD, EPHRATA, PA 17522*
County: *LANCASTER* Region: *CENTRAL*

Administrator

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

Legal Entity

Name: *UNITED CHURCH OF CHRIST HOMES INC*
Address: *30 NORTH 31ST STREET, CAMP HILL, PA, 17011*
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *07/17/1991* Issued By: *L & I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *45* Waking Staff: *34*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #: *0*
Reason: *Renewal* Exit Conference Date: *08/31/2022*

Inspection Dates and Department Representative

08/31/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *48* Residents Served: *45*

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: *45*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *0* Have Physical Disability: *1*

Inspections / Reviews

08/31/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *09/16/2022*

09/14/2022 - POC Submission

Inspections / Reviews *(continued)*

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *09/30/2022*

09/16/2022 - Document Submission

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

183e - Storing Medications

1. Requirements

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

Description of Violation

On 08/31/22, 1 large, oblong pill and 1 small yellow, oblong pill were found in Medication Cart #1.

On 08/31/22, 2 small, white oblong pills were found in Medication Cart #2.

Plan of Correction

Accept

When Nurse administering medications and pushing medication out of bubble pack into med cup missed cup and fell in open drawer. Instead of retrieving loose pill/s punched out next pill in medication packet into med cup.

8/31/22 Loose pills found in med cart disposed of immediately by nursing staff.

All Licensed Direct Care Staff persons were educated on 9/6/2022 by the Personal Care Home Administrator on 2600.183(e) Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitations, temperature, moisture and light and in accordance with the manufacturer's instructions.

Audits of Medication Cart will be completed x3 a week for two weeks by Personal Care Home Administrator /Designee. Then weekly for two weeks by 11-7 Charge Nurse. Medication cart audits will continue on a monthly basis for a minimum of six months or until a pattern of compliance has been established by the QA Committee.

All Licensed Direct Care Staff will continue to be educated at the annual in-services for the 2022 calendar year.

Completion Date: 10/03/2022

Document Submission

Implemented

When Nurse administering medications and pushing medication out of bubble pack into med cup missed cup and fell in open drawer. Instead of retrieving loose pill/s punched out next pill in medication packet into med cup.

8/31/22 Loose pills found in med cart disposed of immediately by nursing staff.

All Licensed Direct Care Staff persons were educated on 9/6/2022 by the Personal Care Home Administrator on 2600.183(e) Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitations, temperature, moisture and light and in accordance with the manufacturer's instructions.

Audits of Medication Cart will be completed x3 a week for two weeks by Personal Care Home Administrator /Designee. Then weekly for two weeks by 11-7 Charge Nurse. Medication cart audits will continue on a monthly

183e - Storing Medications (continued)

basis for a minimum of six months or until a pattern of compliance has been established by the QA Committee.

All Licensed Direct Care Staff will continue to be educated at the annual in-services for the 2022 calendar year.

187c - Refusal of Medication**1. Requirements**

2600.

187.c. If a resident refuses to take a prescribed medication, the refusal shall be documented in the resident's record and on the medication record. The refusal shall be reported to the prescriber within 24 hours, unless otherwise instructed by the prescriber. Subsequent refusals to take a prescribed medication shall be reported as required by the prescriber.

Description of Violation

On [REDACTED] Resident 3 refused to take the scheduled dose of [REDACTED].
No documentation was provided by the home that the physician was notified of the medication refusal.

Plan of Correction**Accept**

Licensed Direct Care Staff did not have knowledge of the 2600.187(c) regulation. Refusals of Medication

Personal Care Home Administrator notified Resident #3's PCP [REDACTED]

Personal Care Home Administrator notified Resident #3's PCP of 2600.187(c) regulation. Instructing PCP to write order if would like Licensed Direct Care Staff to notify PCP as per regulation or no need to notify. Or any further directions/orders on notification of refusals.

All Licensed Direct Care Staff Persons were educated on 9/6/2022 by the Personal Care Home Administrator on Refusal of Medication regulation 2600.187(c) If a resident refuse to take a prescribed medication, the refusal shall be documented in the resident's record and on the medication record. The refusal shall be reported to the prescriber within 24 hours, unless otherwise instructed by the prescriber. Subsequent refusals to take a prescribed medication shall be reported as required by the prescriber.

All Licensed Direct Care Staff will continue to be educated at the annual in-services for the 2022 Calendar year.

Personal Care Home Administrator/Designee will complete random audits weekly. This will be accomplished for a minimum of six months or until a pattern of compliance has been established and approved by the QA Committee.

Completion Date: 10/03/2022

187c - Refusal of Medication (continued)

Document Submission**Implemented**

Licensed Direct Care Staff did not have knowledge of the 2600.187(c) regulation. Refusals of Medication

Personal Care Home Administrator notified Resident #3's PCP of [REDACTED] ry.

Personal Care Home Administrator notified Resident #3's PCP of 2600.187(c) regulation. Instructing PCP to write order if would like Licensed Direct Care Staff to notify PCP as per regulation or no need to notify. Or any further directions/orders on notification of refusals.

All Licensed Direct Care Staff Persons were educated on 9/6/2022 by the Personal Care Home Administrator on Refusal of Medication regulation 2600.187(c) If a resident refuse to take a prescribed medication, the refusal shall be documented in the resident's record and on the medication record. The refusal shall be reported to the prescriber within 24 hours, unless otherwise instructed by the prescriber. Subsequent refusals to take a prescribed medication shall be reported as required by the prescriber.

All Licensed Direct Care Staff will continue to be educated at the annual in-services for the 2022 Calendar year.

Personal Care Home Administrator/Designee will complete random audits weekly. This will be accomplished for a minimum of six months or until a pattern of compliance has been established and approved by the QA Committee.

252 - Record Content

1. Requirements

2600.

252. Content of Resident Records - Each resident's record must include the following information:

2. Race, height, weight, color of hair, color of eyes, religious affiliation, if any, and identifying marks.

Description of Violation

The resident records for Residents 1, 2 and 3 do not include identifying marks.

Plan of Correction**Accept**

Photo Card with required information as per 2600.252 (2) Identifying marks incomplete . Staff did not ask this information upon admission.

Personal Care Home Administrator assessed Resident #1, #2 & #3 for identifying marks and documented on resident record any findings on day of [REDACTED] All other Resident's chart will be reviewed for completion.

All Licensed Direct Care Staff Persons were educated on 9/6/2022 by the Personal Care Home Administrator on regulation 2600.252(2) Content of Resident Records-Each resident's record must include the following information (2) Race, height, weight color of hair, color of eyes, religious affiliation, if any, and identifying marks.

252 - Record Content (continued)

All Licensed Direct Care Staff Persons will continue to be educated at the annual in-services for the 2022 Calendar year.

The Licensed Direct Care Staff upon new admission interview will question resident of any identifying marks. If any identifying marks are present they will be documented on the Photo Card. If no identifying marks it will be documented as a zero with a line through or n/a. Verification of this step will be added to the Ephrata Manor Admission Packet Checklist.

All new admissions will be audited for a minimum of six months or until a pattern of compliance has been reviewed and accepted by the QA Committee.

Personal Care Home Administrator/Designee will audit New Admission Charts for compliance with the above process to ensure Licensed Direct Care Staff maintain compliance with Regulation 2600.252.(2) Content of Resident Records.

Completion Date: 10/03/2022

Document Submission**Implemented**

Photo Card with required information as per 2600.252 (2) Identifying marks incomplete . Staff did not ask this information upon admission.

Personal Care Home Administrator assessed Resident #1, #2 & #3 for identifying marks and documented on resident record any findings on day of Survey 8/31/2022. All other Resident's chart will be reviewed for completion.

All Licensed Direct Care Staff Persons were educated on 9/6/2022 by the Personal Care Home Administrator on regulation 2600.252(2) Content of Resident Records-Each resident's record must include the following information (2) Race, height, weight color of hair, color of eyes, religious affiliation, if any, and identifying marks.

All Licensed Direct Care Staff Persons will continue to be educated at the annual in-services for the 2022 Calendar year.

The Licensed Direct Care Staff upon new admission interview will question resident of any identifying marks. If any identifying marks are present they will be documented on the Photo Card. If no identifying marks it will be documented as a zero with a line through or n/a. Verification of this step will be added to the Ephrata Manor Admission Packet Checklist.

All new admissions will be audited for a minimum of six months or until a pattern of compliance has been reviewed and accepted by the QA Committee.

Personal Care Home Administrator/Designee will audit New Admission Charts for compliance with the above process to ensure Licensed Direct Care Staff maintain compliance with Regulation 2600.252.(2) Content of Resident Records.

252 - Record Content (continued)