

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

April 17, 2024

[REDACTED]  
HARRISBURG AL OPERATIONS LLC  
[REDACTED]

RE: VIVA SENIOR LIVING AT  
HARRISBURG  
150 KEMPTON AVENUE  
HARRISBURG, PA, 17111  
LICENSE/COC#: 33805

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/17/2024 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,

[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

## Facility Information

Name: *VIVA SENIOR LIVING AT HARRISBURG* License #: *33805* License Expiration: *07/01/2024*  
 Address: *150 KEMPTON AVENUE, HARRISBURG, PA 17111*  
 County: *DAUPHIN* Region: *CENTRAL*

## Administrator

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

## Legal Entity

Name: *HARRISBURG AL OPERATIONS LLC*  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

## Certificate(s) of Occupancy

Type: *C-2 LP* Date: *10/15/1997* Issued By: *Labor & Industry*

## Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *100* Waking Staff: *75*

## Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Incident* Exit Conference Date: *01/17/2024*

## Inspection Dates and Department Representative

*01/17/2024 - On-Site:* [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

License Capacity: *96* Residents Served: *87*

## Secured Dementia Care Unit

In Home: *Yes* Area: *Sweet Memories* Capacity: *24* Residents Served: *13*

## Hospice

Current Residents: *7*

## Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *87*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *13* Have Physical Disability: *0*

## Inspections / Reviews

## 01/17/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *02/16/2024*

## 02/26/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: *03/29/2024*  
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/04/2024*

Inspections / Reviews *(continued)*

03/07/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 03/29/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 03/25/2024

04/17/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/29/2024

Reviewer: [REDACTED]

Follow-Up Type: Not Required

## 42b - Abuse

## 1. Requirements

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

The home did not manage Resident [REDACTED] levels or [REDACTED] and did not obtain a physician's order to clarify Resident [REDACTED] sliding scale order for [REDACTED] to ensure the correct amount of units would be administered. Resident [REDACTED] resided in the home from [REDACTED] through [REDACTED]. Per the physicians orders, Resident [REDACTED] was to receive [REDACTED] under the skin three times a day with meals, skip injection if you don't have a meal or [REDACTED] are under [REDACTED]. Additional orders included [REDACTED] under the skin at bedtime. [REDACTED] daily, [REDACTED] if you are [REDACTED] or [REDACTED] are under [REDACTED]. From [REDACTED] through [REDACTED] Resident [REDACTED] was only checked two times per the readings in the resident's [REDACTED]. Per the December 2023 Medication Administration Record (MAR), Resident [REDACTED] received [REDACTED] on [REDACTED] and [REDACTED] without evidence of the residents [REDACTED] level being [REDACTED]. The December 2023 MAR also indicates that Resident [REDACTED] received [REDACTED] on [REDACTED] and [REDACTED] "PM-Before Meal" without evidence of the residents [REDACTED] level being [REDACTED].

## Plan of Correction

Accept ([REDACTED] - 02/26/2024)

RCD during this time was removed from the position on [REDACTED]  
ED provided training with Med-Techs concerning responsibilities surrounding diabetic resident needs, neglect of care and neglect surrounding medications, plus documentation on 1/25/24  
ED, LPN and Pharmacy performed an audit of MARS starting on 1/17/24 and completing on 1/23/2024 ensure all insulin dependent diabetics have orders for [REDACTED] to be performed whether on sliding scale or not. Audit also included ensuring all medications and treatments have a diagnosis listed.  
LPN will audit MARS weekly to ensure orders have diagnosis for each med and treatment for 1 month and monthly thereafter. Audit to include diabetic orders for [REDACTED] have accu checks and parameters.

Licensee's Proposed Overall Completion Date: 02/16/2024

Implemented ([REDACTED] - 04/17/2024)

## 187a - Medication Record

## 2. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

## Description of Violation

Resident [REDACTED] is prescribed [REDACTED], and [REDACTED]. However, Resident [REDACTED] December 2023 Medication Administration Record (MAR) does not indicate the diagnosis or purpose for these medications.

## 187a - Medication Record (continued)

**Plan of Correction**

Accepted [REDACTED] - 03/07/2024)

RCD during this time was removed from the position on 1/5/2024.

ED provided training with Med-Techs concerning responsibilities surrounding diabetic resident needs, neglect surrounding medications, and documentation on 1/25/24

ED, LPN and Pharmacy performed an audit of MARS starting on 1/17/24 and completing on 1/23/2024 ensure all insulin dependent diabetics have orders for [REDACTED] to be performed whether on sliding scale or not. Audit also included ensuring all medications and treatments have a diagnosis listed.

LPN will audit MARS weekly starting on 1/17/24 to ensure orders have diagnosis for each med and treatment for 1 month and monthly thereafter. Audit to include diabetic orders for [REDACTED] have accu checks and parameters. All medications will have diagnosis listed with medication.

ED will educated med techs on 2600.187(a), Medication records on 3/14/024. Training to also include new resident move in medication process.

Proposed Overall Completion Date: 03/14/2024

Licensee's Proposed Overall Completion Date: 03/14/2024

Implemented [REDACTED] - 04/17/2024)

## 187d - Follow Prescriber's Orders

**3. Requirements**

2600.

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

**Description of Violation**

Per physician's orders, Resident [REDACTED] is prescribed [REDACTED] one (1) tablet by mouth daily and [REDACTED], one (1) tablet by mouth daily. However, these medications were not present on the December 2023 Medication Administration Record (MAR) and were not administered to Resident [REDACTED] from [REDACTED] through [REDACTED]

Resident [REDACTED] did not receive the prescribed [REDACTED] doses of the following medications on [REDACTED]

[REDACTED] tablet every 12 hours

[REDACTED] tablet every 12 hours

[REDACTED] puff every 12 hours

[REDACTED] tablet twice daily

[REDACTED] tablet once daily

[REDACTED] Tablet once daily

[REDACTED] tablet once daily

[REDACTED] tablet once daily

Resident [REDACTED] is prescribed [REDACTED] capsule three (3) times daily with meals. Resident [REDACTED] did not receive the [REDACTED] and [REDACTED] doses on [REDACTED]

## 187d - Follow Prescriber's Orders (continued)

Resident [REDACTED] has physician's orders to administer [REDACTED] 0-10 units three times a day with meals; skip [REDACTED] if you don't have a meal or [REDACTED] are under [REDACTED]. Resident [REDACTED] received [REDACTED] on [REDACTED] and [REDACTED] "PM-before meal". However, the resident's [REDACTED] level was not measured to ensure the resident's blood glucose was 110 or above prior to the administration of [REDACTED]

Resident [REDACTED] has physician's orders for [REDACTED] under the skin at bedtime. Inject 30 units daily, [REDACTED] if you are [REDACTED] or [REDACTED] are under [REDACTED]. Resident [REDACTED] received [REDACTED] on [REDACTED] and [REDACTED] at [REDACTED]. However, the resident's [REDACTED] level was not measured to ensure the resident's [REDACTED] was [REDACTED] or above prior to the administration of [REDACTED]

## Plan of Correction

Directed [REDACTED] - 03/07/2024)

RCD during this time was removed from the position on 1/5/2024.

ED provided training with Med-Techs concerning responsibilities surrounding diabetic resident needs, neglect surrounding medications, and documentation on 1/25/24

ED, LPN and Pharmacy performed an audit of MARS starting on 1/17/24 and completing on 1/23/2024 ensure all insulin dependent diabetics have orders for [REDACTED] to be performed whether on sliding scale or not. Audit also included ensuring all medications and treatments have a diagnosis listed.

LPN will audit MARS weekly to ensure orders have diagnosis for each med and treatment for 1 month and monthly thereafter. Audit to include diabetic orders for [REDACTED] have accu checks, parameters and diagnosis.

ED will re-educated med techs on 2600.187(a), Medication records on 3/14/024. Training to also include new resident move in medication process. Process will start for med techs on 3/15/24.

ED will re-educate med techs on 2600.187.d, The home shall follow the directions of the prescriber on 3/14/24.

Proposed Overall Completion Date: 03/14/2024

(Directed)

- RCD during this time was removed from the position on 1/5/2024.
- ED provided training with Med-Techs concerning responsibilities surrounding diabetic resident needs, neglect surrounding medications, and documentation on 1/25/24
- ED, LPN and Pharmacy performed an audit of MARS starting on 1/17/24 and completing on 1/23/2024 ensure all insulin dependent diabetics have orders for blood sugars to be performed whether on sliding scale or not.
- ED will re-educated med techs on 2600.187(a), Medication records on 3/14/024. Training to also include new resident move in medication process. Process will start for med techs on 3/15/24.
- ED will re-educate med techs on 2600.187.d, The home shall follow the directions of the prescriber on 3/14/24.
- The home will review and update their medication administration policy and procedure as necessary to ensure the home has a process for ensuring medications are available and stored properly per physicians orders upon admission. This will be completed by 3/14/24 and staff will be trained on the updated policy and procedure by the administrator or designee.
- Staff will receive education on properly entering all medications and blood glucose checks for a new admission into the Medication Administration by the administrator or designee by 3/14/24.
- The Administrator or designee will audit 25% of resident MAR's weekly for 3 months to ensure medications

**187d - Follow Prescriber's Orders (continued)**

*are being administered per the physician's orders beginning 3/18/24. Issues found should be discussed internally on next steps to ensure meds continue to be administered as ordered.*

- *Documentation of staff education and audits will be kept by the home and available for review by the Department.*

Directed Completion Date: 06/18/2024

Implemented [REDACTED] 04/17/2024)