

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

May 14, 2024

[REDACTED], EXECUTIVE DIRECTOR  
UNITED CHURCH OF CHRIST HOMES INC  
[REDACTED]

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 04/30/2024 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: *EPHRATA MANOR* License #: *32188* License Expiration: *06/24/2024*  
 Address: *99 BETHANY ROAD, EPHRATA, PA 17522*  
 County: *LANCASTER* Region: *CENTRAL*

**Administrator**

Name: [REDACTED] Phone: [REDACTED]

**Legal Entity**

Name: *UNITED CHURCH OF CHRIST HOMES INC*  
 Address: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *08/31/2022* Issued By: *Labor and Industry*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *38* Waking Staff: *29*

**Inspection Information**

Type: *Full* Notice: *Unannounced* BHA Docket #: [REDACTED]  
 Reason: *Renewal* Exit Conference Date: *04/30/2024*

**Inspection Dates and Department Representative**

04/30/2024 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *48* Residents Served: *37*

**Secured Dementia Care Unit**  
 In Home: *No* Area: [REDACTED] Capacity: [REDACTED] Residents Served: [REDACTED]

**Hospice**  
 Current Residents: *0*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *37*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *1* Have Physical Disability: *1*

**Inspections / Reviews**

04/30/2024 Full  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/12/2024*

05/14/2024 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: *05/14/2024*  
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/21/2024*

Inspections / Reviews *(continued)*

05/14/2024 POC Submission

Submitted By: [REDACTED] Date Submitted: 05/14/2024  
Reviewer: [REDACTED] Follow Up Type: Document Submission Follow Up Date: 05/21/2024

05/14/2024 Document Submission

Submitted By: [REDACTED] Date Submitted: 05/14/2024  
Reviewer: [REDACTED] Follow Up Type: Not Required

## 185a - Implement Storage Procedures

## 1. Requirements

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

Resident 1 is prescribed PRN [REDACTED]. On [REDACTED], this medication was not available in the home.

Resident 2's glucometer was not calibrated to the correct date and time. On [REDACTED], glucometer read the date as [REDACTED].

The following discrepancies were observed between Resident 2's glucometer and medication administration record (MAR) readings:

[REDACTED]

## Plan of Correction

Accept [REDACTED] - 05/14/2024)

When Nurse Administering Medications used last supply of Resident #1's prn [REDACTED] medication was not ordered from the Pharmacy.

Upon discovery of Resident 1 not having prn [REDACTED] on hand at [REDACTED] - 11 Nurse immediately ordered medication from Pharmacy. Medication was delivered that evening with the routine Pharmacy delivery.

All Licensed Nurses will be educated on PA DHS Regulation 2600.185.(a) beginning 5/1/2024. This will be completed with all Full-Time Nursing Staff by 5/10/2024 due to one FT Nurse currently on vacation. Will be completed with PRN Nurse upon her return from vacation on 5/15/2024. This Education was offered by the Personal Care Home Administrator and has been completed.

Audit of Medication Carts will be completed by 11-7 Nurse weekly for 2 months and then monthly for 4 months or until a pattern of compliance has been established by the QA Committee. This will begin on Monday 5/6/2024.

Nurse/s transcribed blood sugar results that did not match the glucometer readings. and did not ensure the glucometer was calibrated to the correct date/time.

Resident 2 Glucometer was not calibrated to the correct date/time on [REDACTED].

Glucometer was calibrated to reflect the correct/date time by the Personal Care Home Administrator on 4/30/2024 immediately after completion of the Survey.

185a Implement Storage Procedures (continued)

All Licensed Nurses were educated on ensuring when obtaining a Residents blood sugar that Residents glucometer has the correct date/time. If it does not, they will immediately correct the device, so it is accurate. This training began on 5/1/2024. This will be completed with all Full time Nursing Staff by 5/10/2024 due to one Full time Nurse being on vacation. Will be completed with PRN Nurse upon her return from vacation on 5/15/2024.

11 7 Nurse will Audit Individual Glucometers weekly for 2 months and then monthly for 4 months or until a pattern of compliance has been established by the QA Committee. This will begin on Monday 5/6/2024.

Licensee's Proposed Overall Completion Date: 05/14/2024

Implemented [redacted] - 05/14/2024)

191 - Resident Right to Refuse

2. Requirements

2600.

191. Resident Education - The home shall educate the resident of the right to question or refuse a medication if the resident believes there may be a medication error. Documentation of this resident education shall be kept.

Description of Violation

Resident 2, admitted on [redacted] has no documentation that the resident has been educated to the resident's right to refuse medication if the resident believes that there may be a medication error.

Resident 3, admitted on [redacted], has no documentation that the resident has been educated to the resident's right to refuse medication if the resident believes that there may be a medication error.

Plan of Correction

Accept [redacted] - 05/14/2024)

PCHA attached the Updated Resident Rights Poster from PA DHS dated 2/2023 to Resident 2 contract admitted 8/30/2023 & to Resident 3 contract admitted on 11/30/2023. ON this updated poster it did not have Right to refuse Medication as previous Resident Right Poster.

Upon discovery of omitted information, the Personal Care Home Administrator reviewed regulation 2600.191 Resident Education with each resident on 5/1/2024 and their signature was obtained verifying they acknowledge and received this Resident Education.

All New Admissions will also receive this Resident Education upon Admission.

All Licensed Nurses will be educated on Regulation 2600.191 Resident Education beginning 5/1/2024 with completion date of 5/15/2024 due to Staff vacations. This Education was offered by the Personal Care Home Administrator and has been completed.

Licensee's Proposed Overall Completion Date: 05/14/2024

Implemented [redacted] - 05/14/2024)