pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to **ER 320 OPERATIONS LLC**
LEGAL ENTITY

To operate **EMERALD PERSONAL CARE**
NAME OF FACILITY OR AGENCY

Located at **320 MARKET STREET, ELIZABETHTOWN, PA 17022**
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE/SERVICE LOCATION

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ADDRESS OF SATELLITE SITE/SERVICE LOCATION

To provide **Personal Care Homes**
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed **26**
(MAXIMUM CAPACITY)
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions:

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from **June 7,** **2023** until **June 7,** **2024**,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **338860**

ISSUING OFFICER

ACTING DEPUTY SECRETARY

NOTE This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.

HS 628 – 04/23

pennsylvania
DEPARTMENT OF HUMAN SERVICES

Emailing Date: **June 6, 2023**

[redacted]
ER 320 Operations LLC
[redacted]

RE: Emerald Personal Care
320 Market Street
Elizabethtown, Pennsylvania 17022
Certificate #: 338860

Dear [redacted]:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Office of Long-term Living), licensing inspections on March 22, 2023 of the above facility, we have found that your facility is in substantial compliance with the regulations, set forth in 55 Pa. Code Ch. 2600 (relating to Personal Care Homes).

In accordance with 55 Pa.Code § 2600.11(b) (relating to procedural requirements for licensure or approval of personal care homes) a re-inspection of your newly licensed facility will be conducted within 3 months of the effective date of this license. Complete compliance with all applicable regulations is required in order to maintain your license.

Your NEW license is enclosed.

Sincerely,

Juliet Marsala

Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosures
License

Licensing Inspection Summary

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

April 11, 2023

[redacted]
ER 320 Operations LLC
[redacted]

RE: Emerald Personal Care
320 Market Street
Elizabethtown, PA, 17022
LICENSE/COC#: 33886

Dear [redacted]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/22/2023 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: *Emerald Personal Care* **Licen e #**: *33886* **Licen e Expiration**:

Address: *320 Market Street, Elizabethtown, PA 17022*

County: *LANCASTER* **Region**: *CENTRAL*

Administrator

Name: [redacted] **Phone**: [redacted] **Email**: [redacted]

Legal Entity

Name: *ER 320 Operations LLC*

Address: [redacted]

Email: [redacted]

Certificate(s) of Occupancy

Type: *C 1* **Date**: *05/20/1996* **I ued By**: *DOH*

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff**: *NaN* **Waking Staff**: *NaN*

Inspection Information

Type: *Partial* **Notice**: *Announced* **BHA Docket #**:

Reason: *Change Legal Entity* **Exit Conference Date**: *03/22/2023*

Inspection Dates and Department Representative

03/22/2023 On Site [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: **Residents Served**: *19*

Secured Dementia Care Unit

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

Hospice

Current Residents: *NM*

Number of Residents Who:

Receive Supplemental Security Income: *NM* **Are 60 Years of Age or Older**: *NM*

Diagnosed with Mental Illness: *NM* **Diagnosed with Intellectual Disability**: *NM*

Have Mobility Need: *NM* **Have Physical Disability**: *NM*

Inspections / Reviews

03/22/2023 - Partial

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *04/03/2023*

03/27/2023 - POC Submission

Submitted [redacted] **Date Submitted**: *04/10/2023*

Reviewer: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *03/31/2023*

Inspections / Reviews *(continued)*

04/04/2023 - POC Submission

Submitted By: [redacted] **Date Submitted:** *04/10/2023*

Reviewer: [redacted] **Follow-Up Type:** *Document Submission* **Follow-Up Date:** *04/10/2023*

04/11/2023 - Document Submission

Submitted By: [redacted] **Date Submitted:** *04/10/2023*

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

86b - Bathroom

1. Requirements

2600.
86.b. A bathroom that does not have an operable, outside window shall be equipped with an exhaust fan for ventilation.

Description of Violation

Bathroom #66 does not have an operable outside window, on 3/22/23 it was observed that the ventilation fan was not functioning in this bathroom.

Plan of Correction ***Accept [redacted] - 04/04/2023)***

New exhaust fan to be installed in room 66. Light ordered, install will be completed by Maintenance Director by 4-12-23.

Bathroom exhaust fans will be audited by PCHA or designee for function in 3 rooms, 2x week for 2 weeks, then 1x week for 2 weeks, then monthly for 2 months, starting week of 4-3-23. Note room 66 ventilation fan not part of audit, until installed.

Inspection Findings of 3-22-23 was reported at QA on 3-29-23 by [redacted], pending Administrator. Audit results will be brought to an Ad-hoc QAPI meeting scheduled for 4-13-23. New Administrator of record, [redacted] will provide audit findings to ensure compliance expectations have been met.

Licensee's Proposed Overall Completion Date: *04/14/2023*

Implemented [redacted] - 04/11/2023)

88a - Surfaces

2. Requirements

2600.
88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

There are two holes in the linoleum in the bathroom in room #51. The hole closest to the toilet is approximately 4 inches by 2.5 inches. The second hole by the sink is approximately 8 inches by 2 inches.

Plan of Correction ***Accept [redacted] - 04/04/2023)***

New Bathroom flooring to be installed in room 51. Flooring is onsite, install will be completed by Maintenance Director by 4-12-23.

Bathroom flooring will be audited by PCHA/Designee for safety and dignity in 3 rooms, 2x week for 2 weeks, then 1x week for 2 weeks, then monthly for 2 months, starting week of 4-3-23. Note room 51 flooring not part of audit, until installed.

Inspection Findings of 3-22-23 was reported at QA on 3-29-23 by [redacted], pending Administrator.

Audit results will be brought to an Ad-hoc QAPI meeting scheduled for 4-13-23. New Administrator of record, [redacted] will provide audit findings to ensure compliance expectations have been met.

Licensee's Proposed Overall Completion Date: *04/14/2023*

88a - Surfaces *(continued)*

Implemented (04/11/2023)

101j7 - Lighting/Operable Lamp

3. Requirements

2600.
101.j. Each resident shall have the following in the bedroom:
7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

Resident #1 does not have access to a source of light that can be turned on/off at bedside.

Plan of Correction ***Accept - 04/04/2023)***

Lamp moved to bedside, by Clinical Director on 4-3-23.
Resident (FS) educated regarding regulation, by PCHA on 4-3-23.

Placement of bedside lamps will be audited by PCHA or designee in 3 rooms, 2x week for 2 weeks, then 1x week for 2 weeks, then monthly for 2 weeks, starting week of 4-3-23.

nspection Findings of 3-22-23 was reported at QA on 3-29-23 by , pending Administrator.

Audit results will be brought to an Ad-hoc QAPI meeting scheduled for 4-13-23. New Administrator of record, k will provide audit findings to ensure compliance expectations have been met.

Licensee's Proposed Overall Completion Date: *04/14/2023*

Implemented - 04/11/2023)