pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to **ODD FELLOWS HOME OF PENNSYLVANIA INC**
LEGAL ENTITY

To operate **CRESCENT VIEW ASSISTED LIVING**
NAME OF FACILITY OR AGENCY

Located at **999 WEST HARRISBURG PIKE, MIDDLETOWN, PA 17057**
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE/SERVICE LOCATION

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ADDRESS OF SATELLITE SITE/SERVICE LOCATION

To provide **Assisted Living**
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed **98**
(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 2800: Assisted Living Residences
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from **October 1, 2023** until **October 1, 2024**,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **338920**

ISSUING OFFICER

Juliet Marsala
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: September 29, 2023

[redacted]
Odd Fellows Home of Pennsylvania, Inc.
999 West Harrisburg Pike
Middletown, Pennsylvania 17057

RE: Crescent View Assisted Living
Certificate#: 338920

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 June 28, 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. 2800 (relating to Assisted Living Residence).

In accordance with 55 Pa.Code § 2800.11(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

Facility Information

Name: *CRESCENT VIEW ASSISTED LIVING* **License #**: *33892* **License Expiration**:

Address: *999 WEST HARRISBURG PIKE, MIDDLETOWN, PA 17057*

County: *DAUPHIN* **Region**: *CENTRAL*

Administrator

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

Legal Entity

Name: *ODD FELLOWS HOME OF PENNSYLVANIA INC*

Address: *999 WEST HARRISBURG PIKE, MIDDLETOWN, PA, 17057*

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

Certificate(s) of Occupancy

Type: *C-2 LP* **Date**: *01/25/1999* **Issued By**: *L&I*

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff**: *43* **Waking Staff**: *32*

Inspection Information

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

Reason: *New, Change Legal Entity* **Exit Conference Date**: *06/28/2023*

Inspection Dates and Department Representative

06/28/2023 - On-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: **Residents Served**: *42*

Special Care Unit

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

Hospice

Current Residents: *1*

Number of Residents Who:

Receive Supplemental Security Income: *4* **Are 60 Years of Age or Older**: *1*

Diagnosed with Mental Illness: *3* **Diagnosed with Intellectual Disability**: *2*

Have Mobility Need: *1* **Have Physical Disability**: *0*

Inspections / Reviews

06/28/2023 - Partial

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *07/09/2023*

07/31/2023 - POC Submission

Submitted By: [redacted] **Date Submitted**: *07/21/2023*

Reviewer: [redacted] **Follow-Up Type**: *Document Submission* **Follow-Up Date**: *08/04/2023*

Inspections / Reviews *(continued)*

08/16/2023 - Document Submission

Submitted By: [redacted] **Date Submitted**: *08/14/2023*

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

91 Telephone Numbers

1. Requirements

2800.
91. Emergency Telephone Numbers - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and assisted living residence complaint hotline shall be posted on or by each telephone with an outside line.

Description of Violation

There are no emergency telephone numbers to include the nearest hospital and fire Department on or by the telephone in resident rooms 128, 232, 236, 333, 334 and 342.

Plan of Correction ***Accept [redacted] 07/24/2023)***

The Maintenance Director, or designee, will post the emergency numbers on the back of every resident room door by 7/7/2023.
Beginning 7/10/2023, the Housekeepers will check the back of the resident's doors for emergency telephone numbers and replace as needed while cleaning the resident's rooms weekly.
Beginning 8/1/2023, the Maintenance Director or designee will inspect a random sample of rooms monthly to ensure the telephone numbers are posted. Documentation shall be kept.

Licensee's Proposed Overall Completion Date: *08/07/2023*

Implemented [redacted] - 08/16/2023)

101j7 Lighting/operable lamp

2. Requirements

2800.
101.j. Each resident shall have the following in the living unit:
7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

Residents #1, 2, 3, 4, 5, 6 or 7 do not have access to a source of light that can be turned on/off at their bedside.

Plan of Correction ***Accept [redacted] - 07/24/2023)***

The Maintenance Director or designee will install bedside lights in the identified rooms by 7/7/2023.
By 7/7/2023, The Maintenance Director or designee shall inspect every room to ensure they have a working light at bedside.
Beginning 7/10/2023, the Housekeepers shall check the bedside to ensure there is a working light source, operable at bedside, during weekly room cleaning.

Licensee's Proposed Overall Completion Date: *08/07/2023*

Implemented [redacted] 08/16/2023)

183b Medications and syringes locked

3. Requirements

2800.
183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident’s living unit.

Description of Violation

On 6/28/23 at 11:55 am, the 3rd floor medication office was open and unsupervised. Inside the medication room, there was a medication cart with a key in the lock. The medication cart was able to be unlocked with this key. Several

183b Medications and syringes locked (continued)

residents' medications were accessible, including resident #8's Biofreeze gel and resident #9's Mupironcin ointment.

Plan of Correction ***Directed [redacted] - 07/31/2023)***

The Medication room door was closed and locked immediately after being identified by the licensing representative on 6/28/2023 at 11:55 am by the Nursing Supervisor.
The Nursing Supervisor or designee shall conduct an in-service for all medication administration staff by 7/28/2023 on the policies and procedures for ensuring all medications are stored securely or under direct supervision by trained staff members, at all times.
The Nursing Director or designee shall periodically check the medication storage room throughout the day to ensure the door is closed and secured when not in use.

[Directed]

The Medication room door was closed and locked immediately after being identified by the licensing representative on 6/28/2023 at 11:55 am by the Nursing Supervisor.
The Nursing Supervisor or designee shall conduct an in-service for all medication administration staff by 7/28/2023 on the policies and procedures for ensuring all medications are stored securely or under direct supervision by trained staff members, at all times.
Beginning on 8/1/2023, the Nursing Director or designee shall periodically check the medication storage room throughout the day to ensure the door is closed and secured when not in use.

Directed Completion Date: *07/31/2023*

Implemented [redacted] - 08/16/2023)