pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to **EC OPCO DILLSBURG LLC**
LEGAL ENTITY

To operate **CELEBRATION VILLA OF DILLSBURG**
NAME OF FACILITY OR AGENCY

Located at **153 LOGAN ROAD, DILLSBURG, PA 17019**
(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 **80**
(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 **January 16, 2024** until **January 16, 2025**,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **333790**

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: JANUARY 16, 2024

EC OPCO Dillsburg LLC
[redacted]

RE: Celebration Villa of Dillsburg
153 Logan Road
Dillsburg, Pennslvania 17019
License #: 333791

Dear EC OPCO Dillsburg LLC:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on October 31, 2023, and November 1, 2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Correction of these violations in accordance with the specified plan of correction is required. Continued compliance must be maintained.

Sincerely,

Juliet Marsala

Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosure
<Licensing Inspection Summaries>

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

November 27, 2023

[redacted]
EC OPCO DILLSBURG LLC
[redacted]

RE: CELEBRATION VILLA OF DILLSBURG
153 LOGAN ROAD
DILLSBURG, PA, 17019
LICENSE/COC#: 33379

Dear [redacted]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/31/2023, 11/01/2023 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: *CELEBRATION VILLA OF DILLSBURG* **License #**: *33379* **License Expiration**: *01/21/2024*

Address: *153 LOGAN ROAD, DILLSBURG, PA 17019*

County: *YORK* **Region**: *CENTRAL*

Administrator

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

Legal Entity

Name: *EC OPCO DILLSBURG LLC*

Address: [redacted]

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

Certificate(s) of Occupancy

Type: *C-2 LP* **Date**: *11/05/1998* **Issued By**: *L & I*

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff**: *55* **Waking Staff**: *41*

Inspection Information

Type: *Full* **Notice**: *Unannounced* **BHA Docket #**: *0*

Reason: *Renewal* **Exit Conference Date**: *11/01/2023*

Inspection Dates and Department Representative

10/31/2023 - On-Site: [redacted]

11/01/2023 - On-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *80* **Residents Served**: *50*

Secured Dementia Care Unit

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

Hospice

Current Residents: *8*

Number of Residents Who:

Receive Supplemental Security Income: *0* **Are 60 Years of Age or Older**: *50*

Diagnosed with Mental Illness: *0* **Diagnosed with Intellectual Disability**: *3*

Have Mobility Need: *5* **Have Physical Disability**: *0*

Inspections / Reviews

10/31/2023 - Full

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *11/19/2023*

11/20/2023 - POC Submission

Submitted By: [redacted] **Date Submitted**: *11/24/2023*

Reviewer: [redacted] **Follow-Up Type**: *Document Submission* **Follow-Up Date**: *12/01/2023*

Inspections / Reviews *(continued)*

11/27/2023 - Document Submission

Submitted By: [redacted] **Date Submitted**: *11/24/2023*

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

25e - Contract Rescission

1. Requirements

2600.
25.e. The resident, or a designated person, has the right to rescind the contract for up to 72 hours after the initial dated signature of the contract and pay only for the services received. Rescission of the contract must be in writing addressed to the home.

Description of Violation

Resident 2 and Resident 3's contract did not include the section pertaining to the right to rescind the contract for up to 72 hours after the initial dated signature.

Plan of Correction ***Accept [redacted] - 11/20/2023)***

The Resident Agreement has been corrected from the corporate level to reflect this requirement effective 1/1/2023 and all new contracts signed after 1/1/2023 include this provision. All department managers will be educated on this regulation 2600.25e by the Administrator by 11/30/2023.
Ongoing, the Administrator will ensure that all Resident Agreements signed after 1/1/2023 include the requirement by completing an audit by 11/30/2023. Results will be reviewed at the monthly QA meeting in December 2023.

Licensee's Proposed Overall Completion Date: *11/30/2023*

Implemented ([redacted] - 11/27/2023)

42q - Compensation

2. Requirements

2600.
42.q. A resident shall be compensated in accordance with State and Federal labor laws for labor performed on behalf of the home. Residents may voluntarily and without coercion perform tasks related directly to the resident's personal space or common areas of the home.

Description of Violation

On 10/31/23, at approximately 9:03 am, Resident 1 was observed bussing tables, including tables 4, 6, 10 and 15. Resident 1 was scraping off food into the trash container, stacking dishes, collecting utensils and cloth napkins as well as collecting and disposing of paper placemats. This resident has performed this type of work on other occasions for the home and has not been compensated.

Plan of Correction ***Accept [redacted] - 11/20/2023)***

On 10/31/2023, Resident was immediately removed from dining room from bussing tables and explained that she was unable to assist by Administrator. Administrator called and spoke with Resident's representative on 10/31/2023 and explained the regulation.
All department managers will be educated on this regulation 2600.42.q by the Administrator by 11/30/2023.
Ongoing, the community will not allow residents to complete tasks that are normally assigned to staff members, even if they volunteer. Any resident who wishes to assist with housekeeping, dining or activity duties will be educated on the regulation. Their Responsible Party will also be informed of the regulation and the resident RASP/CarePlan will reflect the resident's desire to volunteer.

Licensee's Proposed Overall Completion Date: *11/30/2023*

Implemented ([redacted] - 11/27/2023)

85d - Trash Receptacles

3. Requirements

2600.
85.d. Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

Description of Violation

On 10/31/23 at 2:15 pm, there was a full, uncovered, unattended trash can in the kitchen.

Plan of Correction ***Accept (11/20/2023)***

On 11/1/2023, the trashcan in the kitchen was replaced by the Director of Maintenance with a new trashcan that has an attached closing lid.
All department managers will be educated on this regulation 2600.85.d by the Administrator by 11/30/2023.
Beginning 11/20/2023, The Dining Director or Administrator will complete weekly checks to ensure all trashcans in the kitchen are covered or have a lid available when not in use. Results will be documented and reviewed at Monthly QA meetings starting December 2023.

Licensee's Proposed Overall Completion Date: *11/30/2023*

Implemented (- 11/27/2023)

86b - Bathroom

4. 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

The bathroom in bedroom 229 does not have an operable window or ventilation fan.

Plan of Correction ***Accept (- 11/20/2023)***

On 11/1/2023, the Maintenance Director investigated the issue in the attic and discovered the duct to that apartment was closed. He reengaged the spring-loaded cover and tested its operation. The exhaust fan started working immediately in room 229.
All department managers will be educated on this regulation 2600.86.b by the Administrator by 11/30/2023.
Ongoing: Starting 11/20/2023, Maintenance Director or Administrator will conduct a weekly audit on the operation of ventilation fans in multiple resident apartments to ensure compliance and that they are operational. This audit will be reviewed at monthly QA meeting starting December 2023.

Licensee's Proposed Overall Completion Date: *11/30/2023*

Implemented - 11/27/2023)

103f - Refrigerator/Freezer Temps

5. Requirements

2600.
103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

Description of Violation

There was no thermometer in the walk-in refrigerator located in the kitchen.

Plan of Correction ***Accept 11/20/2023)***

On 10/31/2023, a new thermometer was placed in the walk-in refrigerator by the Maintenance Director.
All department managers will be educated on this regulation 2600.103.f by the Administrator by 11/30/2023.

103f - Refrigerator/Freezer Temps (continued)

Starting 11/20/2023, Dietary Director and/or Cook will check refrigerator daily for four weeks to ensure that all thermometers are present in kitchen refrigerators and freezers. After 4 weeks, Administrator or member of leadership will do weekly checks to ensure thermometers are present and operational. Results of checks will be reviewed at monthly QA meeting starting December 2023.

Licensee's Proposed Overall Completion Date: *11/30/2023*

Implemented [redacted] - 11/27/2023)

183e - Storing Medications

6. 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 11/01/23, 3 loose pills were found in the 100-hall medication cart.

Plan of Correction ***Accept ([redacted] - 11/20/2023)***

On 11/1/2023, the loose pills in 100 hall medication cart were removed by Director of Nursing and replacement doses were ordered.
Director of Nursing, Assistant Director of Nursing and med techs will be educated on this regulation 2600.183.e by the Administrator by 11/30/2023.
Starting 11/20/2023, medication cart audits will continue to be completed weekly by the Director of Nursing, Assistant Director of Nursing and/or Medication Technician to ensure no loose pills are present in the cart drawers. The associate completing the cart audit will also visually check the back of the medication cards to ensure they are intact and that any bottles with lids are secured tightly.? Starting 12/1/2023, Administrator will complete weekly cart checks to look for loose medications. Results of the audits and cart checks will be reviewed at monthly QA meeting starting December 2023.?

Licensee's Proposed Overall Completion Date: *11/30/2023*

Implemented ([redacted] - 11/27/2023)