



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**  
**MAILING DATE: MAR 21 2016**

Mr. Henry Ebner, Administrator  
Artman Lutheran Home  
250 Bethlehem Pike  
Ambler, Pennsylvania 19002

RE: Artman Lutheran Home  
License #: 127780

Dear Mr. Ebner:

As a result of the Department of Human Services' licensing inspection on December 18, 2015 and January 14, 2016 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read 'Patricia Adams', written over a horizontal line.

Patricia Adams  
Regional Licensing Administrator

Enclosure  
Licensing Inspection Summary

**VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: ARTMAN LUTHERAN HOME		License Number: 12778
Address: 250 BETHLEHEM PIKE, AMBLER, PA 19002		County: Montgomery
Administrator: Henry Ebner		Region:
Legal Entity Name: ARTMAN LUTHERAN HOME		
Legal Entity Address: 250 BETHLEHEM PIKE, AMBLER, PA 19002		
Certificate(s) of Occupancy		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 180	Working Staff: 135
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 12/17/2015: Keppel, Autumn; McHale, Christine		
Off-Site Inspection Dates and Inspectors, If Applicable 12/18/2015: Keppel, Autumn 01/14/2016: Keppel, Autumn		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 136	Number of Residents who:	
Number of Residents Served: 115	Receive Supplemental Security Income: 0	
Secured Dementia Care Unit in Home: No	Are 60 Years of Age or Older: 115	
Area:	Have Mental Illness: 0	
Secured Dementia Unit Capacity, if Applicable:	Have an Intellectual Disability: 0	
Number of Residents Served in Secured Dementia Care Unit, if applicable:	Have a Mobility Need: 65	
Number of Current Hospice Residents: 5	Have a Physical Disability: 0	
Number of Hospice Residents in past year: 25		

Violation Report: 12778 - 12/17/2015 - Keppel, Autumn  
PCH Name: ARTMAN LUTHERAN HOME

1. REGULATION 55 Pa.Code §2600  
2600.42(c) - A resident shall be treated with dignity and respect.

2a. DESCRIPTION OF VIOLATION  
On 12/9/16 at 8:30 PM, Staff Member A requested that Staff Member B, the LPN, change the wound dressing on Resident #1. Staff Member B requested that Staff Member A assist as they were the caregiver assigned to the resident. While Staff Member B gathered supplies at the resident's dresser, Staff Member A assisted the resident with getting cleaned and changed. As Staff Member A was assisting the resident, Staff Member B overheard them tell the resident "God's going to take care of you for the way you are." Staff Member B informed the staff that they could not talk to the resident like that. Staff Member A stated that they were "just playing," and Staff Member B told them that they could not play like that. As Staff Member B resumed what they were doing, they could hear Staff Member A tell the resident multiple times to "shut up," and "stop it," and saw that the two were swatting at each other, battling for position. Staff Member B asked the staff member to leave the room.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)  
Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.


- a. Staff member A was suspended during investigation and was eventually terminated
- b. All staff also training on Prevention, Recognizing and reporting abuse. PCA held meetings with staff and reviewed them again on Abuse + treating all residents with dignity + respect.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative  
(Required on EVERY Page)

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Henry Eber PCA	Date 2/22/16
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>3/1/16</u> (Date)	Plan of correction implementation status as of <u>3/1/16</u> (Date)
The above plan of correction was approved by  (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented