



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**  
**MAILING DATE: AUG 03 2016**

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

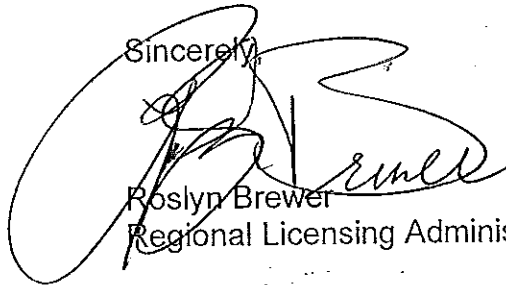
RE: Artman Lutheran Home  
License #: 127780

Dear Mr. Ebner:

As a result of the Department of Human Services' licensing inspection on April 12, 2016 which we conducted on-site inspections] 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,



Roslyn Brewer  
Regional Licensing Administrator

Enclosure  
Licensing Inspection Summary



Violation Report: 12778 - 04/12/2016 - Colon, Lissette  
 PCH Name: ARTMAN LUTHERAN HOME

1. REGULATION 55 Pa.Code §2600  
 2600.15(c) - The home shall immediately submit to the Department's personal care home regional office a plan of supervision or notice of suspension of the affected staff person.

2a. DESCRIPTION OF VIOLATION

On 3/22/16, an allegation of abuse was made against staff person A regarding resident # 1. The staff person was suspended and returned on 4/7/16, however, the home did not submit a plan of supervision to the Department.

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.

1. Staff member was suspended upon investigation
2. Reported to DHS and AAA
3. April 12, 2016 - DHS in to investigate - no allegations verified.
4. Staff member to return with the following:
  1. Trained on
    - a. Customer Service
    - b. Abuse + Neglect
    - c. Communication with Hearing Impaired
    - d. Caring for Elderly
    - e. The Key to Culture Change
  2. Staff member to be supervised for 1 year with another CNA (See Attached)
  3. CNA will not be assigned to resident in future

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

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Henry Ebnor PCA* Date *7/1/16*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of *7/6/16*  
 (Date)

Plan of correction implementation status as of *7/6/16*  
 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

The above plan of correction was approved by *[Signature]*  
 (Initials)