



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JUL 17 2017

Ms. Lisa Defibaugh,
Executive Director
Homewood at Martinsburg, Inc.
437 Givler Drive
Martinsburg, Pennsylvania 16662

RE: Homewood at Martinsburg
License #: 360110

Dear Ms. Defibaugh:

As a result of the Department of Human Services' annual licensing inspections on May 16, 2017 and May 17, 2017 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.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2800

PCH Name: HOMEWOOD AT MARTINSBURG		License Number: 360110
Address: 437 GIVIER DRIVE, MARTINSBURG, PA 16682		County: Blair
Administrator: Mandi Cottle		Region: CENTRAL
Legal Entity Name: HOMEWOOD AT MARTINSBURG INC		
Legal Entity Address: 437 GIVLER DRIVE, MARTINSBURG, PA 16682		
Certificate(s) of Occupancy		
C-1 07/03/1996 DOH		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 81	Working Staff: 68
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Renewal		
On-Site Inspections Dates and Department Representatives On-Site		
05/16/2017: Springs, Israel; McCloskey, Jason		
05/17/2017: Springs, Israel; McCloskey, Jason		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 101 Number of Residents Served: 75 Secured Dementia Care Unit in Home: Yes Area: Waterside Secured Dementia Unit Capacity, if Applicable: 15 Number of Residents Served in Secured Dementia Care Unit, if applicable: 15 Number of Current Hospice Residents: 1 Number of Hospice Residents in past year: 1	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 75 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 16 Have a Physical Disability: 3	

Violation Report: 36011 - 05/16/2017 - Springs, Israel
 PCH Name: HOMEWOOD AT MARTINSBURG

1. REGULATION 55 Pa.Code §2600

2600.65(g) - Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:

- (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert.
- (2) Emergency preparedness procedures and recognition and response to crises and emergency situations.
- (3) Resident rights.
- (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101-10225.5102).
- (5) Falls and accident prevention.
- (6) New population groups that are being served at the home that were not previously served, if applicable.

2a. DESCRIPTION OF VIOLATION

The 2016 Annual fire training for Staff Person A, Staff Person B, Staff Person C, and Staff Person D was not completed by a fire safety expert or by a staff person trained by a fire safety expert.

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.

The Martinsburg Fire Department has been contacted and a mandatory fire training by fire safety expert, [REDACTED] Fire Chief, will be held on June 20, 2017 at 7pm. All staff working on the Personal Care Dementia Unit and the Assisted Life Style Services Units of Personal Care are mandated to attend. Postings have been placed throughout the facility (see Attachment 1) and all staff received a personal letter in the mail (see Attachment 2). Training by the fire chief will include 2600.65(g) and the training will be scheduled annually here on out. Two members of Homewood's maintenance staff will also be attending the seminar on Train the Trainer of Fire Safety on June 14, 2017 hosted by Temple.

In addition to the training by fire safety expert scheduled for June 20, 2017, there will also be a new training provided to all Homewood Employees on September 12, 2017 called "Safety Day" and staff will be trained annually on the proper use of Fire Extinguishers.

These plans to improve our fire safety training will be monitored by the Personal Care Home Administrator, Mandi Cottle annually.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Mandi Cottle, PCA*

Printed Name and Title of Legal Entity Representative *Mandi Cottle, MCA, PCA* Date *5-26-17*
Assisted Lifestyle Services Director

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

The above plan of correction is approved as of 5/30/17
 (Date)

The above plan of correction was approved by MC
 (Initials)

Plan of correction implementation status as of 5/30/17
 (Date)

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

Violation Report: 36011 - 05/16/2017 - Springs, Israel
 PCH Name: HOMEWOOD AT MARTINSBURG

1. REGULATION 55 Pa.Code §2800
 2600.95 - Furniture and equipment must be in good repair, clean and free of hazards.

2a. DESCRIPTION OF VIOLATION
 Resident #1 has an enabler bar, with a 10 inch opening between the sides of the bar, attached to the resident's bed. The opening is uncovered and presents a risk of entrapment for the head or limbs of the resident.

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.

Homewood has ordered new enabler bars that include mesh sleeves from WalMart.com on May 20, 2017 (see Attachment 3). Community Health Services Coordinator [REDACTED] RN, will be monitoring the installation and quarterly inspection of all bars to ensure that they are covered and each resident is kept free from harm. Extra mesh sleeves have also been ordered to ensure bars are always covered while being laundered. Direct care staff will also be educated at monthly meetings the importance of monitoring the enabler bars to ensure they are covered.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Mandi Cottis, RHA*

Printed Name and Title of Legal Entity Representative *Assisted Lifestyle Services Director, Mandi Cottis, MSW, RHA* Date *5/26/17*

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

The above plan of correction is approved as of 5/30/17
 (Date)

The above plan of correction was approved by BAS
 (Initials)

Plan of correction implementation status as of 5/30/17
 (Date)

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

Violation Report: 36011 - 05/16/2017 - Springs, Israel
 PCH Name: HOMEWOOD AT MARTINSBURG

1. REGULATION 55 Pa. Code §2600

2600.121(a) - Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

2a. DESCRIPTION OF VIOLATION

The exit door leading out to the sidewalk from the dining room can be unlocked using a keypad. The code for the operation of the keypad was not posted.

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.

Keypad code was posted immediately on May 17, 2017 after surveyors citation. (See attachment 4.) Administrator will audit door monthly to ensure door code is properly posted in the Crabtree Dining Room in an area that is easily visible for the Personal Care Home Residents to see.

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

Printed Name and Title of Legal Entity Representative *Mandi Cottle, MSW, RCH* Date *5-20-17*
 (Required on EVERY Page) *Assisted Lifestyle Services Director*

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

The above plan of correction is approved as of <u>5/30/17</u> (Date)	Plan of correction implementation status as of <u>5/30/17</u> (Date)
The above plan of correction was approved by <u>BCS</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented