



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to CREEK SENIOR CARE LLC
LEGAL ENTITY

To operate THE BRIDGES AT BENT CREEK
NAME OF FACILITY OR AGENCY

Located at 2100 BENT CREEK BOULEVARD, MECHANICSBURG, PA 17050
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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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 130
(MAXIMUM CAPACITY)
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.
Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 31

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 October 31, 2017 until October 31, 2018,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **333550**

Robert E. Robinson
ISSUING OFFICER

Jay Baul
DIRECTOR

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.



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DEPARTMENT OF HUMAN SERVICES

OCT 30 2017

Mr. Martin Steinberger,
Indirect Manager
Creek Senior Care, LLC
1000 Legion Place, Suite 1600
Orlando, Florida 32801

RE: The Bridges at Bent Creek
2100 Bent Creek Boulevard
Mechanicsburg, Pennsylvania 17050
License #:333550

Dear Mr. Steinberger:

As a result of the Department of Human Services' Adult Residential Licensing's annual licensing inspection on October 11, 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.

A regular license is being issued based on the enclosed License Inspection Summary. Your license is enclosed.

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.

Mr. Martin Steinberger

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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,



Jacqueline L. Rowe

Director

Enclosure

License

License Inspection Summary

Violation Report: - 10/11/2017 - Heemer, Laura
 PCH Name: The Bridges at Bent Creek

1. REGULATION 55 Pa.Code §2600
 2600.85(a) - Sanitary conditions shall be maintained.

2a. DESCRIPTION OF VIOLATION

On 10/11/2017 at approximately 10:15 am, dried feces was observed on the shower seat and on the rim of the toilet seat lid, located in the bathroom of Resident Room 174.

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 bathroom in room 174 was cleaned immediately during the inspection.

Staff were coached and will monitor the bathrooms and clean upon discovery of any issues and after assisting the residents as needed.

Compliance will be monitored by housekeeping and the Garden Coordinator.

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Bobbi Olson, Executive Director Date 10/12/17

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

The above plan of correction is approved as of 10/12/17
 (Date)

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

Plan of correction implementation status as of 10/12/17
 (Date)

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

Violation Report: - 10/11/2017 - Heerner, Laura
 PCH Name: The Bridges at Bent Creek

1. REGULATION 55 Pa. Code §2600

2600.28(a) - Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

A black mold like substance was observed on the refrigerator and freezer gaskets in the main kitchen.

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 refrigerator and freezer gaskets were cleaned immediately following the inspection.
 In addition, replacement gaskets were ordered and will be installed when delivered but no later than November 1, 2017.
 The gasket cleaning was added to the monthly cleaning schedule.

Compliance will be monitored by the Dining Services Director and Director of Plant Operations.

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Bobbi Olson, Executive Director Date 10/12/17

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

The above plan of correction is approved as of 10/12/17
 (Date)

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

Plan of correction implementation status as of 10/12/17
 (Date)

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