



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: [REDACTED]  
Mailing Date: March 27, 2018

Ms. Joanne M. Regina  
CEO  
Renaissance Home Forks, LLC  
2222 Sullivan Trail  
Easton, Pennsylvania 18040

RE: Renaissance Home Forks  
License # 226921

Dear Ms. Regina:

As a result of the Department of Human Services' licensing inspection on January 16, 2018 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,

*Anne Graziano*  
Anne Graziano  
Regional Licensing Administrator

Enclosure  
Licensing Inspection Summary

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

PCH Name: RENAISSANCE HOME FORKS		License Number: 22692
Address: 2222 SULLIVAN TRAIL, EASTON, PA 18040		County: Northampton
Administrator: Rich Hosmer		Region: NORTHEAST
Legal Entity Name: RENAISSANCE HOME FORKS LLC		
Legal Entity Address: 2222 SULLIVAN TRAIL, EASTON, PA 18040		
<b>Certificate(s) of Occupancy</b>		
I-1 06/21/2007 Forks Township	C-2 LP 09/15/1999 L&I	
<b>Staffing Hours</b>		
Resident Support: 0	Total Daily Staff: 59	Waking Staff: 44
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
<b>Reason(s) for Inspection(s)</b>		
Complaint		
<b>On-Site Inspections Dates and Department Representatives On-Site</b>		
01/16/2018: Novak, Ryan		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b>		
<b>Other Details</b>		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 61 Number of Residents Served: 43 Secured Dementia Care Unit in Home: Yes Area: n/a Secured Dementia Unit Capacity, if Applicable: 20 Number of Residents Served in Secured Dementia Care Unit, if applicable: 10 Number of Current Hospice Residents: 3 Number of Hospice Residents in past year: 7	<b>Number of Residents who:</b> Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 43 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 16 Have a Physical Disability: 1	

Violation Report: 22692 - 01/16/2018 - Novak, Ryan  
 PCH Name: RENAISSANCE HOME FORKS

1. **REGULATION 55 Pa.Code §2600**  
 2600.81(b) - Wheelchairs, walkers, prosthetic devices and other apparatus used by residents must be clean, in good repair and free of hazards.

2a. **DESCRIPTION OF VIOLATION**  
 Resident #1 had a 1/2 bedrail approximately 3 feet long with 2 4 inch sections throughout the rail. The slats on the bedrail are not covered and pose a possible limb entrapment risk.

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.

An all staff meeting was held on 1/25/18. It was discussed that any bed with a side rail or assistive device on a on a bed must be covered. It was explained that this is done so that the resident cannot put there limbs through and cause an entrapment risk. The bed rail was covered after the violation was found, but the resident has since passed and the bed rail has been removed from the bed.

For the POC the administrator will ensure the following:

- Ensure that any resident with bed rails and assistive devices on their beds will be covered and secured at all times.
- Staff will reguarly check to make sure the covers remain on so that the resident can not get a limb entraped.
- Ensure that all staff are educated on the importance of having the rails and assistive devices covered.
- Ensure that all residents POA are educated on why the resident has to have the covering and answer any questions they might have.
- Evaluate the resident to see if a bed rail or assistive device is really needed for that resident and if not the administrator will notify the POA that the device is being removed.
- Document in the DME and RASP that the resident has a bed rail or assistive device and why they are needed.

*The Administrator will oversee all steps of the plan to ensure ongoing compliance. P.*

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)



Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page)


Richard L Hosmer LNW Administrator

Date 2/27/18

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

The above plan of correction is approved as of 3/26/18  
 (Date)

Plan of correction implementation status as of 3/26/18  
 (Date)

The above plan of correction was approved by   
 (Initials)

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

Violation Report: 22692 - 01/16/2018 - Novak, Ryan  
 PCH Name: RENAISSANCE HOME FORKS

**1. REGULATION 55 Pa.Code §2600**

2600.82(c) - Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

**2a. DESCRIPTION OF VIOLATION**

A bottle of All with Stain Lifter labeled "if swallowed drink a glass of water and call a physician was located in Resident #2's bedroom. Resident #2 resides on the homes memory care unit and is unable to safely handle and identify poisons.

**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.*

An all staff meeting was held on 1/25/18. A review of our policy and procedure #82 "poisonous materials" was done. It was explained that all staff are responsible for ensuring that no poisonous materials are in any rooms where a residents is unable to safely use and/or avoid them. It was also explained if they are not sure if a resident can or can not safely use and avoid poisonous materials they can ask or check in the residents care plan.

For the POC the administrator will ensure the following:

- All cleaning supplies and/or any poisonous materials will be stored in a locked closet or cabinet away from residents.
- Staff will regularly check and make sure that all cleaning supplies are placed back in the appropriate storage areas. If a poisonous material is found left out, the staff who left it out will be reeducated, written up and the write up will be put in their employee file.
- Staff will regularly check to make sure that residents visitors did not bring in poisonous materials to the residents that cannot safely use and avoid them. If found the staff will remove the item and the Administrator or Med Tech supervisor will notify the POA to let them know that the resident cannot have poisonous materials in their room.

*The Administrator will oversee to ensure ongoing compliance. P.*

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

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Richard L Hosmer LPN Administrator* Date *2/27/18*

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

The above plan of correction is approved as of <u>3/26/18</u> (Date)	Plan of correction implementation status as of <u>3/26/18</u> (Date)
The above plan of correction was approved by <u><i>PH</i></u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented