



pennsylvania
DEPARTMENT OF HUMAN SERVICES

**Sent via e-mail to: dcalderwood@foxdalevillage.org
MAILING DATE: June 16, 2020**

Mr. Rich Lysle
Chief Executive Officer
Foxdale Village Corporation
500 East Marylyn Avenue
State College, Pennsylvania 16801

RE: Foxdale Village
License #: 245650

Dear Mr. Lysle:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on April 17, 2020 and April 20, 2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Anne Graziano".

Anne Graziano
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: *FOXDALE VILLAGE*

License Number: 24565

Address: *500 EAST MARYLYN AVENUE, STATE COLLEGE, PA 16801*

County: *CENTRE*

Region: *NORTHEAST*

Administrator

Name: *DeAnna Calderwood*

Phone: *8142383322*

Email: *DCALDERWOOD@FOXDALEVILLAGE.ORG*

Legal Entity

Name: *FOXDALE VILLAGE CORPORATION*

Address: *500 EAST MARYLYN AVENUE, STATE COLLEGE, PA, 16801*

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *0*

Total Daily Staff: *46*

Waking Staff: *35*

Inspection

Type: *Partial*

BHA Docket #:

Notice: *Unannounced*

Reason: *Incident*

Inspection Dates and Department Representative

04/20/2020 - Off-Site: Gerald Dumas

04/17/2020 - Off-Site: Gerald Dumas

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *64*

Residents Served: *46*

Secured Dementia Care Unit

In Home: *No*

Area:

Capacity:

Residents Served:

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *0*

Are 60 Years of Age or Older: *46*

Diagnosed with Mental Illness: *0*

Diagnosed with Intellectual Disability: *0*

Have Mobility Need: *0*

Have Physical Disability: *0*

132h - Designated Meeting Place

Regulations

2600.

132.h. Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

Description of Violation


The home's fire drill log indicated that an overnight drill was conducted on 2/7/20 at 2:20 a.m. with 49 residents participating and 4 staff. Residents # 1 and # 2 did not participate and remained in their rooms. The home did not run another overnight fire drill in the month of February.

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.)

Please see attached

Legal Entity Representative


Signature

DeAnna Calderwood PC Administrator
Printed Name and Title
5/8/20 Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 6-10-2020
(Date)

Plan of correction implementation status as of 6-10-2020
(Date)

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

Implemented
 Not Implemented

Regulation 132.h is a important and necessary regulation to ensure that residents can and do participate in fire drills on a regular basis.

Upon notification that resident #1 and resident #2 refused to evacuate during the fire drill held on 2/7/20 at 2:20 a.m., Meg Clouser, NHA and Director of Health Services provided one on one education to each resident to discuss the importance of participating in fire drills, along with the regulation. During these conversations each resident expressed understanding and agreement to fully participate in all fire drills moving forward.

All monthly fire drills will be monitored for compliance with evacuation procedures from all residents living in Personal Care. We will still continue to provide immediate education to any resident that refuses to evacuate per regulatory guidance. We will consider issuing a 30 day discharge notice to any residents who display chronic refusal posing a danger to oneself and in violation of the homes rules, as they are grounds for discharge pursuant to 2600.228(h)(1)(7).

We will continue to consider running an additional fire drill within the month, on the same shift if, a resident refuses to evacuate during the scheduled drill. We understand that running another fire drill that successfully meets regulatory guidance does not negate the violation.

Given the current waiver of all fire drills during the COVID-19 pandemic along with Governor Wolf's directive, we will wait to run an additional "sleep time" drill until suspension of regulation is lifted by DHS. At the time of the regulation suspension being lifted we will repeat the "sleep time" drill as directed by the Field Office Surveyor.

Personal Care Administrator will monitor for ongoing compliance.

 5/8/20
Signature

DeAnna Calderwood
Printed Name & Title Personal
Care
Administrator