

Department of Human Services  
Bureau of Human Service Licensing

October 13, 2020

DIANE WOLFGANG, ADMINISTRATOR  
LUTHER RIDGE FACILITY OPERATIONS LLC  
160 RED HORSE ROAD  
POTTSVILLE, PA 17901

RE: LUTHER RIDGE AT SEIDERS HILL  
160 RED HORSE ROAD  
POTTSVILLE, PA, 17901  
LICENSE/COC#: 22466

Dear Ms. Wolfgang,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/05/2020, 08/12/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Anne Graziano

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Department of Human Services  
Bureau of Human Service Licensing  
LICENSING INSPECTION SUMMARY**

**Facility Information**

Name: *LUTHER RIDGE AT SEIDERS HILL* License #: *22466* License Expiration Date: *03/12/2021*  
 Address: *160 RED HORSE ROAD, POTTSVILLE, PA 17901*  
 County: *SCHUYLKILL* Region: *NORTHEAST*

**Administrator**

Name: *Diane Wolfgang* Phone: *5706217200* Email:  
*Diane.K.Wolfgang@consulatehc.com;*  
*lindscott@pa.gov; agraziano@pa.gov*

**Legal Entity**

Name: *LUTHER RIDGE FACILITY OPERATIONS LLC*  
 Address: *160 RED HORSE ROAD, POTTSVILLE, PA, 17901*  
 Phone: *5706217200* Email: *LUTHERRIDGE.EXECUTIVEDIR@CONSULATEHC.COM*

**Certificate(s) of Occupancy**

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *87* Waking Staff: *65*

**Inspection**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Incident* Exit Conference Date: *08/17/2020*

**Inspection Dates and Department Representative**

*08/05/2020 - Off-Site: Ryan Yankowy*  
*08/12/2020 - Off-Site: Ryan Yankowy*

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *135* Residents Served: *79*

**Special Care Unit**

In Home: *No* Area: Capacity: Residents Served:

**Hospice**

Current Residents: *4*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *79*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *2*  
 Have Mobility Need: *8* Have Physical Disability: *0*

## Inspections / Reviews

## 08/05/2020 - Partial

Lead Inspector: *Ryan Yankowy*Follow-Up Type: *POC Submission*Follow-Up Date: *09/08/2020*

## 9/4/2020 - POC Submission

Lead Reviewer: *Anne Graziano*Follow-Up Type: *Document Submission*Follow-Up Date: *09/30/2020*

## 10/13/2020 - Document Submission

Lead Reviewer: *Anne Graziano*Follow-Up Type: *Not Required*

42c Dignity/Respect

1. Requirements

2800.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

On 7/29/20 Staff person A raised his\her voice and told Resident #1 "its protocol you need to be in your room, if the resident doesn't go back to his\her room the staff person is going to call the police and he\she will be escorted out of the building." Staff person A tried to intimidate Resident #1 and did not treat the resident with dignity and respect.

Plan of Correction

Directed

Staff member was suspended pending an investigation following the report from a co-worker. Upon completion of the investigation, the employee was terminated and did not re-enter the building. All staff members are being retrained in dignity and respect to be reminded of the importance of showing dignity and respect in every interaction. Executive Director or designee will conduct random resident interviews to ensure staff is treating them with respect and dignity.

Directed Plan of Correction:

Upon completion of Dignity and Respect component of resident rights training, the home will send the completed sign in sheets to the Northeastern Regional Office with the resubmitted Plan of Correction. AG

Completion Date: 09/30/2020

Document Submission

Implemented

Attached are the training records that were requested.