

Department of Human Services
Bureau of Human Service Licensing

November 15, 2020

MARK T PIKE, CEO/PRESIDENT
DIAKON LUTHERAN SOCIAL MINISTRIES
ONE SOUTH HOME AVENUE
TOPTON, PA 19562

RE: THE BUEHRLE CENTER
ONE SOUTH HOME AVENUE
TOPTON, PA, 19562
LICENSE/COC#: 21496

Dear Mr. Pike,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/08/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Michele Moskalczyk
Human Services Licensing Supervisor

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: *THE BUEHRLE CENTER* License #: *21496* License Expiration Date: *07/24/2021*
Address: *ONE SOUTH HOME AVENUE, TOPTON, PA 19562*
County: *BERKS* Region: *NORTHEAST*

Administrator

Name: *Erin Garcia* Phone: *6106821400* Email:
garciae@diakon.org, lindscott@pa.gov,
mmoskalczy@pa.gov

Legal Entity

Name: *DIAKON LUTHERAN SOCIAL MINISTRIES*
Address: *ONE SOUTH HOME AVENUE, TOPTON, PA, 19562*
Phone: *6106821400* Email: *PILEM@DIAKON.ORG*

Certificate(s) of Occupancy

Type: *Other* Date: *07/02/2018* Issued By: *Dept. of Health*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *125* Waking Staff: *94*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Incident* Exit Conference Date: *09/08/2020*

Inspection Dates and Department Representative

09/08/2020 - Off-Site: Ann O'Haire

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *92* Residents Served: *75*

Secured Dementia Care Unit

In Home: *Yes* Area: *1st floor* Capacity: *25* Residents Served: *23*

Hospice

Current Residents: *2*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *75*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *025*
Have Mobility Need: *50* Have Physical Disability: *0*

Inspections / Reviews

09/08/2020 - Partial**Lead Inspector:** *Ann O'Haire***Follow-Up Type:** *POC Submission***Follow-Up Date:** *10/23/2020***10/22/2020 - POC Submission****Lead Reviewer:** *Michele Moskalczyk***Follow-Up Type:** *Document Submission***Follow-Up Date:** *11/11/2020***11/15/2020 - Document Submission****Lead Reviewer:** *Michele Moskalczyk***Follow-Up Type:** *Not Required*

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

Resident #1 struck Resident #2 on her left side of her face causing a skin tear on the left side of her nose when her eyeglasses came off her face.

Plan of Correction**Accept**

Consult with Resident 1 PCP for medication evaluation. Completed 9/8/2020

Consult with Med Options Psychiatry services. Completed 9/9/2020 PCP did not approve Med Options Psychiatry Services even though was formally on caseload.

Education on Montessori based programming and philosophy provided each Thursday to Nursing, Administration, and Activities through Montessori consultant to provide education on non-pharmaceutical interventions and ongoing engagement to reduce behavioral outbursts. Ongoing for 1 year contract.

Education provided to Personal care staff on de-escalation and behavior management provided by Charge Nurse. Completed 9/10/2020

Offer room move to resident #2. Offered 9/8/20 Resident #2 declined room move.

Offer mesh stop sign to go across door entrance that is placed by Velcro and can be removed by resident #2 to provide visual tool not to enter the room without permission. Completed 9/9/2020. Resident #2 accepting of intervention and sign placed.

Offer room move to POA of resident #2 9/9/2020. POA declined room move.

Administrator or clinical service manager will monitor ongoing for signs or symptoms of abuse.

Completion Date: 10/20/2020

Update - 10/22/2020

Within 20 days of receipt of this plan of correction:

1. All staff, including the administrator, will receive training in resident rights.

2. Education provided to Personal care staff on de-escalation and behavior management provided by Charge Nurse. Completed 9/10/2020

Please provide proof of staff training on #1, #2 within 20 days.

Immediately and Ongoing:

A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Document Submission**Implemented**

Added attachments on resident right training and inservice 9/10/20 that were due within 20 days of 10/22/20