



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail [REDACTED]

August 10, 2022

[REDACTED]
Masonic Villages of the Grand Lodge of Pennsylvania
801 Ridge Pike
Lafayette Hill, Pennsylvania 19444

RE: Masonic Village of Lafayette Hill
License #: 13870

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on October 1, 2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

[REDACTED]

[REDACTED]

Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

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

Facility Information

Name: MASONIC VILLAGE OF LAFAYETTE HILL **Licen e #:** 13870 **Licen e Expiration Date:** 01/01/2021
Adde : 801 RIDGE PIKE, LAFAYETTE HILL, PA 19444
County: MONTGOMERY **Region:** SOUTHEAST

Administrator

Name: [REDACTED] **Phone:** [REDACTED] **Email:**
[REDACTED]
[REDACTED]

Legal Entity

Name: MASONIC VILLAGES OF THE GRAND LODGE OF PENNSYLVANIA
Address: 801 RIDGE PIKE, LAFAYETTE HILL, PA, 19444
Phone [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 04/10/1989 **Issued By:** L&I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 31 **Waking Staff:** 23

Inspection

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Rea on: Complaint **Exit Conference Date:** 10/01/2020

Inspection Dates and Department Representative

10/01/2020 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 51 **Residents Served:** 31

Secured Dementia Care Unit

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

Hospice

Current Re ident : 0

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 31
Diagnosed with Mental Illness: 1 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 0 **Have Physical Disability:** 0

Inspections / Reviews

10/01/2020 - Partial

Lead Inspector: [REDACTED] Follow Up Type: *POC Submission* Follow-Up Date: *10/28/2020*

10/28/2020 POC Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *11/03/2020*

18 - Compliance With Laws

1. Requirements

2600.

- 18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

On [redacted] 2020 the Pennsylvania Department of Health issued PAHAN-492, alerting healthcare and congregate care settings of Universal Masking Guidelines. Additionally on [redacted]/20, Pennsylvania Department of Health issued PAHAN-520, updating interim guidelines for infection prevention and control related to COVID-19, indicating that all healthcare partners should wear a facemask at all times while they are in the healthcare facility, including in breakrooms, shared work stations or other spaces where they might encounter coworkers. These Health Alerts issued by the Department of Health apply to Personal Care Homes.

On [redacted]/20, a representative of the Department interviewed staff and residents of the personal care home. It was determined staff are routinely not wearing facemasks while staff are in the nursing station of the personal care home, even when other direct care and nursing staff are present in the room. Resident medications, treatments and other equipment are stored in the nursing station, posing an infection control and sanitation issue with respect to COVID-19, as staff are not wear masks appropriately while in the nurses station.

Plan of Correction

Accept

All staff will wear masks at all times in PC area, including the nurses station. Masks will only be removed to eat in designated areas. Re-education provided to staff on 10/1/2020. Formal education again given on 10/20/20, and 10/21/20. Mask audits will be done weekly, and will rotate shifts and departments. Audits started 10/6/2020. Audits will continue weekly for three months. Audits will be reviewed at QAPI, and the QAPI committee will review compliance, and determine continued need for audits.

Completion Date: 10/26/2020

Implemented

65i - Training Record

1. Requirements

2600.

- 65.i. A record of training including the staff person trained, date, source, content, length of each course and copies of any certificates received, shall be kept.

Description of Violation

The home's record of direct care staff training does not include the date of which the training was actually conducted for each staff person. The record of training contains the year only..

Plan of Correction

Accept

The month, date, and year will be recorded for all in-services starting 10/2/2020. PC director will add complete date to all trainings and educations. PC director and or designee will review monthly to ensure compliance.

Completion Date: 10/26/2020

Implemented

85a - Sanitary Conditions

1. Requirements

2600.

- 85.a. Sanitary conditions shall be maintained.

85a - Sanitary Conditions (continued)

Description of Violation

On [REDACTED]/20, direct care staff reported to the Department that direct care and nursing staff are routinely not wearing facemasks while staff are in the nursing station of the personal care home even when other staff are present in the area. Resident medications, treatments and other equipment used for or by residents are stored in the nursing station posing an infection control and sanitation issue with respect to COVID-19 as staff are not wear masks appropriately while in the nurses station.

Plan of Correction

Accept

All staff will wear masks at all times in PC area, including the nurses station. Masks will only be removed to eat in designated areas. Re-education provided to staff on 10/1/2020. Formal education again given on 10/20/20, and 10/21. Mask audits will be done weekly, and will rotate shifts and departments. Audits started 10/6/2020. Audits will continue weekly for three months. Audits will be reviewed at QAPI, and the QAPI committee will review compliance, and determine continued need for audits.

Completion Date: 10/26/2020

Implemented