

Department of Human Services
Bureau of Human Service Licensing

July 20, 2021

[REDACTED] ADMINISTRATOR
RENAISSANCE HOME PINEBROOK LLC
2 WOODBRIDGE ROAD
ORWIGSBURG, PA 17961

RE: RENAISSANCE HOME PINEBROOK
2 WOODBRIDGE ROAD
ORWIGSBURG, PA, 17961
LICENSE/COC#: 22755

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/09/2021, 02/17/2021, 04/09/2021, 04/15/2021, 04/30/2021, 05/05/2021, 05/17/2021, 05/21/2021, 05/27/2021 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: RENAISSANCE HOME PINEBROOK License #: 22755 License Expiration Date: 05/20/2022
Address: 2 WOODBRIDGE ROAD, ORWIGSBURG, PA 17961
County: SCHUYLKILL Region: NORTHEAST

Administrator

Name: [REDACTED] Phone: 4842398249 Email: [REDACTED]

Legal Entity

Name: RENAISSANCE HOME PINEBROOK LLC
Address: 2 WOODBRIDGE ROAD, ORWIGSBURG, PA, 17961
Phone: 5703668544 Email: [REDACTED]

Certificate(s) of Occupancy

Type: I-2 Date: 09/18/2018 Issued By: West Brunswick Twp

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 36 Waking Staff: 27

Inspection

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint Exit Conference Date: 02/09/2021

Inspection Dates and Department Representative

02/09/2021 - On-Site: [REDACTED]
02/17/2021 - Off Site: [REDACTED]
04/09/2021 - Off-Site: [REDACTED]
04/15/2021 - Off-Site: [REDACTED]
04/30/2021 - Off-Site: [REDACTED]
05/05/2021 - Off Site: [REDACTED]
05/17/2021 - Off-Site: [REDACTED]
05/21/2021 - Off-Site: [REDACTED]
05/27/2021 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 68 Residents Served: 35

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Resident Demographic Data as of Inspection Dates *(continued)*

Hospice

Current Residents: 7

Number of Residents Who:

Receive Supplemental Security Income: 4

Are 60 Years of Age or Older: 34

Diagnosed with Mental Illness: 4

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 1

Have Physical Disability: 0

Inspections / Reviews

02/09/2021 - Partial

Lead Inspector: [REDACTED]

Follow Up Type: *POC Submission*

Follow-Up Date: *06/20/2021*

7/13/2021 POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *07/20/2021*

7/20/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

60a - Staff/Support Plan

1. Requirements

2600.

60.a. Staffing shall be provided to meet the needs of the residents as specified in the resident’s assessment and support plan.

Description of Violation

Only staff member A was scheduled on 1/16/2021 from 11:15pm until 3:00am. The home cares for 35 residents including 1 resident with mobility needs that requires a 2 person assist. The scheduled staff was unable to evacuate this resident in the event of an emergency.

Plan of Correction

Accept

Both the administrator and the director of nursing are on call and will cover shifts that are open or unexpectedly open up due to a call off or staff emergency. Both the administrator and director of nursing are salaried employees and do not punch in and out on a time clock.

On 1/16/2021, due to staffing challenges caused from Covid-19, both the administrator and the director of nursing were unexpectedly needed to cover the time period between 11:15pm and 3am.

We believe that the claim that only one staff member was present during this time was made by a disgruntled employee who was terminated shortly after this date and we have no way to prove her wrong because we have no punch clock timecard or any other way to prove our presence.

I believe that both our initials were on the schedule for that night.

Going forward the administrator and the director of wellness will continue to make sure our initials are documented on the schedules any time that we are covering overnight schedules.

Completion Date: 06/16/2021

Update - 07/13/2021

Within 1 week of receipt of this plan of correction:

The administrator or designee shall monitor ALL resident's needs and staffing patterns and ensure that staffing is being provided to meet the needs of the residents as specified in the resident’s assessment and support plan.

The staff schedule shall be monitored weekly X's 4 months by the administrator.

Please send/Attach proof of current staff schedule, back two weeks.

7-13-2021 - MM

Document Submission

Implemented

attached is current 2 week staff schedule