

Department of Human Services
Bureau of Human Service Licensing

June 7, 2021

[REDACTED], OWNER/ADMINISTRATOR
SMEM 1957 LLC
1441 BALTIMORE PIKE
HANOVER, PA 17331

RE: SHARON'S PERSONAL CARE HOME
1441 BALTIMORE PIKE
HANOVER, PA, 17331
LICENSE/COC#: 33239

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/03/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Gloria Emick

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: *SHARON'S PERSONAL CARE HOME* License #: *33239* License Expiration Date: *07/11/2021*
 Address: *1441 BALTIMORE PIKE, HANOVER, PA 17331*
 County: *YORK* Region: *CENTRAL*

Administrator

Name: [REDACTED] Phone: *7176321414* Email: [REDACTED]

Legal Entity

Name: *SMEM 1957 LLC*
 Address: *1441 BALTIMORE PIKE, HANOVER, PA, 17331*
 Phone: *7176321414* Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *08/28/2001* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *10* Waking Staff: *8*

Inspection

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal* Exit Conference Date: *03/03/2021*

Inspection Dates and Department Representative

03/03/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *23* Residents Served: *10*

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: *9*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

03/03/2021 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/29/2021*

Inspections / Reviews *(continued)*

5/20/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *06/30/2021*

6/7/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

89b - Hot Water Temperature

1. Requirements

2600.

89.b. Hot water temperature in areas accessible to the resident may not exceed 120°F.

Description of Violation

The hot water temperature at the sink in the bathroom, across from Room #5, measured 136 degrees Fahrenheit.

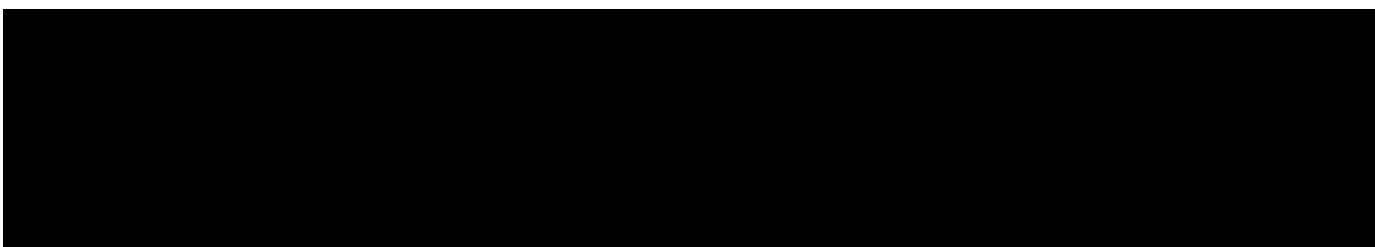
Plan of Correction

Accept

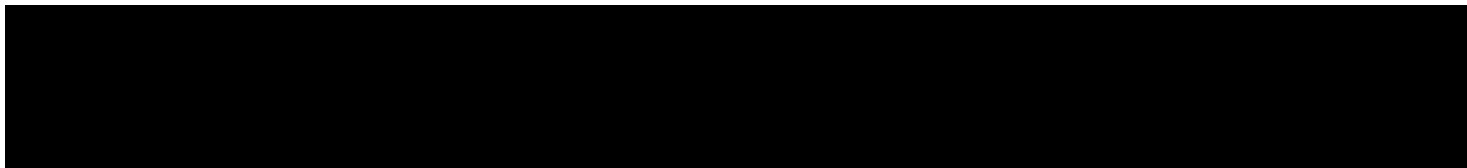
CHECKED HOTWATER HEATER, TURNED THERMOSTAT BACK 3 DEGREES ADJUSTED UNTIL WATER TEMPERATURE WAS 118 DEGREES. ADMINISTRATOR WILL CONTINUE TO MONITOR MONTHLY.

Completion Date: 03/26/2021

plemented



Violation Withdrawn, GE, 5/20/21



Violation Withdrawn - GE, 5/20/21



183d - Prescription Current

1. Requirements

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

On 3/3/2021, the prescribed medication, [redacted] for Resident #1, was in the home's medication cart; however, the medication was discontinued in December of 2020.

Plan of Correction

Accept

THE ADMINSTRATOR WILL AUDIT THE MEDICATION CART MONTHLY TO ENSURE THAT THERE ARE ONLY CURRENT PERSCRIPTIONS FOR RESIDENTS STORED IN THE CART. ANY EXPIRED OR DISCONTINUED MEDICATIONS WILL BE REMOVED.

Completion Date: 03/04/2021

183d - Prescription Current (*continued*)**Document Submission****Implemented***ALL STEPS HAVE BEEN COMPLETED.*

221c - Post Activity Calendar

1. Requirements

2600.

221.c. A current weekly activity calendar shall be posted in a conspicuous and public place in the home.

Description of Violation*The home does not have a current weekly activity calendar posted in a public and conspicuous place in the home.***Plan of Correction****Accept***ADMINSTRATOR WILL CHECK THE ACTIVITY CALENDAR THE FIRST OF EACH MONTH AND UPDATE THE CALENDAR.**Completion Date: 03/04/2021***Document Submission****Implemented***ALL STEPS HAVE BEEN COMPLETED.*

225c - Additional Assessment

1. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

2. If the condition of the resident significantly changes prior to the annual assessment.

Description of Violation*Resident #3 has bed safety rails attached to both sides of the bed. The safety rails were prescribed by the resident's physician in [REDACTED] following [REDACTED]. The assessment portion of the resident's RASP does not reflect the need for the safety rails.***Plan of Correction****Accept***ADMINISTRATOR ADDRESSED THE RAILS, AND UPDATED RASP. ADMINISTRATOR WILL AUDIT ALL CURRENT RASPS TO MAKE SURE ALL RESIDENT'S NEEDS ARE BEING MET BY 6/30/21.**GOING FORWARD ADMINISTRATOR WILL UPDATE RASP AT THE TIME OF SIGNIFICANT CHANGE OF RESIDENT.**Completion Date: 03/22/2021***Document Submission****Implemented***RASP AUDIT TO BE COMPLETED IN JUNE.*

227c - Support Plan Revision

1. Requirements

2600.

227.c. The support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment.

227c - Support Plan Revision (*continued*)**Description of Violation**

Resident #3 has bed safety rails attached to both sides of the bed. The safety rails were prescribed by the resident's physician in [REDACTED] following a [REDACTED]. The bedrails were subsequently supplied by the resident's family. The RASP for Resident #3 does not address the need for the safety bedrails and how the resident's safety needs will be met. Nor does it include a plan to protect the resident from potential dangers of the safety bedrails.

Plan of Correction**Accept**

ADMINISTRATOR ADDRESSED THE RAILS, AND UPDATED RASP. ADMINISTRATOR PUT COVERS OVER BOTH RAILS FOR PROTECTION FOR RESIDENT. DCS WILL DO TWO HOUR BED CHECKS ON RESIDENT. MAILED PHOTOS.

Completion Date: 03/19/2021

Document Submission**Implemented**

ALL STEPS HAVE BEEN COMPLETED.