

Department of Human Services
Bureau of Human Service Licensing

September 22, 2021

[REDACTED], PRESIDENT
[REDACTED]
[REDACTED]
[REDACTED]

RE: ELMCROFT OF LEWISBURG
2421 OLD TURNPIKE ROAD
LEWISBURG, PA, 17837
LICENSE/COCC#: 22720

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/02/2021, 06/03/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

[REDACTED]
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: *ELMCROFT OF LEWISBURG* License #: *22720* License Expiration Date: *07/03/2021*
Address: *2421 OLD TURNPIKE ROAD, LEWISBURG, PA 17837*
County: *UNION* Region: *NORTHEAST*

Administrator

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

Legal Entity

[REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *10/18/1998* Issued By: *PA L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *35* Waking Staff: *26*

Inspection

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *06/03/2021*

Inspection Dates and Department Representative

06/02/2021 - On-Site: [REDACTED]
06/03/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *73* Residents Served: *34*

Secured Dementia Care Unit

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

Hospice

Current Residents: *1*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *34*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *1* Have Physical Disability: *0*

Inspections / Reviews

06/02/2021 - Full

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *07/10/2021*

8/10/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *08/13/2021*

9/22/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

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

The Carbon Monoxide detector in the home's activity room was located next to the home's gas fired fireplace. The placement of the carbon monoxide detector was not 15 feet away from the fireplace as required.

Plan of Correction

Accept

Action: On 06/02/2021, day of inspection, Carbon Monoxide detector was relocated greater than 15 feet away from fireplace and shown to inspector. See attachment A.

Training: On 06/10/2021, Executive Director/Administrator provided training to Maintenance Manager on regulation 2600.18. See attachment B.

Ongoing: Executive Director and/or Designee will monitor all new installments of Carbon Monoxide detectors.

Completion Date: 07/09/2021

Document Submission

Implemented

See attachment A and B.

81a - Accomodation

1. Requirements

2600.

- 81.a. The home shall provide or arrange for physical site accommodations and equipment necessary to meet the health and safety needs of a resident with a disability and to allow safe movement within the home and exiting from the home.

Description of Violation

Room #130 had two bed canes attached to the bed. The openings on the bed canes were large enough to entrap the resident's limbs and may cause injury.

Plan of Correction

Accept

Action: On 06/02/2021, day of inspection, bed Halo (they are not bed cane as stated in violation) were covered with recommended DHS covering. See attachment C.

Training: On 06/10/2021 Executive Director/Administrator provided training to all associates on regulation 2600.81.a.. See attachment D.

Ongoing: Administrator and or designee will monitor for compliance daily to confirm Halo cover in place.

Completion Date: 07/09/2021

Document Submission

Implemented

See attachment D.

133.1 - Exit Signs

1. Requirements

133.1 - Exit Signs (continued)

2600.

133.1. Exit Signs - The following requirements apply for a home serving nine or more residents: Signs bearing the word "EXIT" in plain legible letters shall be placed at all exits.

Description of Violation

The doors leading to the interior courtyard were not marked that they were not an exists. If a door is not used as an exit, it must be labeled that is not an exit.

Plan of Correction

Accept

Action: On 06/02/2021, day of inspection, "Not an Exit" signage was posted above interior courtyard door by Maintenance Director and shown to inspector on 06/03/2021. See attachment E.

Training: On 06/10/2021, Executive Director/Administrator provided training to Maintenance Manager on regulation 2600.133.1. See attachment F.

Ongoing: Executive Director and/or Designee will walk to community daily to confirm compliance.

Completion Date: 07/09/2021

Document Submission

Implemented

See attachment E and F.

171b5 - First Aid Kit

1. Requirements

2600.

171.b. The following requirements apply whenever staff persons or volunteers of the home provide transportation for the resident:

5. The vehicle must have a first aid kit with the contents as specified in § 2600.96 (relating to first aid kit).

Description of Violation

The first aid kit located in the home's 18 passenger bus did not contain a breathing shield or eye covering.

Plan of Correction

Accept

Action: On 06/02/2021, day of inspection, first aid kit was updated with a breathing shield and eye covering by the nurse. See attachment G.

Training: On 06/10/2021, Executive Director/Administrator provided training to Maintenance Manager/Healthy Lifestyles Director on regulation 2600.171.b. See attachment H.

Ongoing: Executive Director and/or designee will monitor first aid kit for compliance monthly.

Completion Date: 07/09/2021

Document Submission

Implemented

See attachment G.