



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**Emailing Date: December 16, 2021**

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██

Tel Hai Retirement Community  
P.O. Box 190  
1200 Tel Hai Circle  
Honey Brook, PA 19344

RE: Lakeview at Tel Hai Personal Care  
Certificate #: 173640

Dear ██████████:

As the result of your home's recent request to adjust the use of the physical space, the Department has granted an approval for a revised license issued under the authority of 55 Pa. Code Ch. 2600 (relating to Personal Care Homes). The approved capacity revision request is an increase in SDCU beds from 7 to 25 and a reduction in personal care beds from 93 to 75. The expiration date of the license remains unchanged.

Any future requests for changes in capacity should be forwarded to the Department for review and consideration in accordance with the applicable regulations. The revised license is enclosed.

Sincerely,

A handwritten signature in black ink that reads "Jamie F. Buchenauer".

Jamie Buchenauer  
Deputy Secretary  
Office of Long-term Living

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

**Facility Information**

Name: LAKEVIEW AT TEL HAI PERSONAL CARE License #: 17364 License Expiration:  
Address: PO BOX 190,4200 TEL HAI CIRCLE, HONEY BROOK, PA 19344  
County: CHESTER Region: SOUTHEAST

**Administrator**

Name: [REDACTED] Phone: 6102739333 Email: [REDACTED]

**Legal Entity**

Name: TEL HAI RETIREMENT COMMUNITY  
Address: PO BOX 190,1200 TEL HAI CIRCLE, HONEY BROOK, PA, 19344  
Phone: 6102739333 Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: C-2 LP Date: 05/27/1988 Issued By: Dept of L&I

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 97 Waking Staff: 73

**Inspection Information**

Type: Partial Notice: Announced BHA Docket #:  
Reason: Interim Exit Conference Date: 09/09/2021

**Inspection Dates and Department Representative**

09/09/2021 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: 100 Residents Served: 71

**Secured Dementia Care Unit**

In Home: Yes Area: SDCU Capacity: 7 Residents Served: 5

**Hospice**

Current Residents: 4

**Number of Residents Who:**

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 71  
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
Have Mobility Need: 26 Have Physical Disability: 1

**Inspections / Reviews**

**09/09/2021 - Partial**

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 10/07/2021

**09/09/2021 - POC Submission**

Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 12/16/2021

Inspection Dates and Department Representative (*continued*)

09/09/2021 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

## 91 - Telephone Numbers

## Physical Site

## 1. Requirements

2600.

91. Emergency Telephone Numbers - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

## Description of Violation

*On 9/9/21, There are no emergency telephone numbers to include the nearest hospital and fire department on or by the telephone in resident bedroom 306.*

## Plan of Correction

**Accept**

1. Telephone numbers were added near the phone immediately following the inspection (see attached photo).
2. Administrator completed an audit of all third floor rooms on 9/27/21 to be sure that all rooms have emergency numbers posted.
3. Resident Assistants are responsible to monitor for phone numbers during monthly room checks.
4. Service Facilitator (or designee) will check two rooms each week for four weeks to ensure that phone numbers are still present.
5. Results of the audit will be reviewed at the monthly PI meeting.

**Completion Date:** 01/07/2022

## Document Submission

**Implemented**

*documents attached*

**Completion Date:** 12/15/2021

## 233c - Key-Locking Devices

## Secured Dementia Care Units

## 1. Requirements

2600.

- 233.c. If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

## Description of Violation

*The directions for operating the home's locking mechanism are not conspicuously posted near the doors to the Secure Dementia Care Unit (SDCU).*

## Plan of Correction

**Accept**

1. Keypads have been installed to allow exit of visitors. Team members may also use the badge swipe to exit. Signs regarding the directions/code for exit have been posted at all exit doors (see attached photos). Code is disguised within a written greeting to visitors. (See attached). Code is 2512.
2. Administrator will audit doors weekly for four weeks to ensure signs remain in place.
3. Results of the audit will be reviewed at the monthly PI meeting.

**Completion Date:** 01/07/2022

## Document Submission

**Implemented**

*documents attached*

**Completion Date:** 12/15/2021