

Department of Human Services
Bureau of Human Service Licensing

July 20, 2022

[REDACTED], OWNER/Administrator
[REDACTED]
[REDACTED]

RE: OUR ORANGEVILLE MANOR
PERSONAL CARE HOME
210 MILL STREET, PO BOX 157
ORANGEVILLE, PA, 17859
LICENSE/COC#: 22393

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/26/2022 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: *OUR ORANGEVILLE MANOR PERSONAL CARE HOME* License #: *22393* License Expiration: *06/14/2023*
Address: *210 MILL STREET, PO BOX 157, ORANGEVILLE, PA 17859*
County: *COLUMBIA* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *OUR ORANGEVILLE MANOR INC*
Address: *PO BOX 157, 210 MILL STREET, ORANGEVILLE, PA, 17859*
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *12/30/1982* Issued By: *PA L&I*

Staffing Hours

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

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *04/26/2022*

Inspection Dates and Department Representative

04/26/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *36* Residents Served: *31*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *14* Are 60 Years of Age or Older: *29*
Diagnosed with Mental Illness: *31* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

04/26/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/23/2022*

Inspections / Reviews (*continued*)

06/23/2022 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *06/29/2022*

07/20/2022 - Document Submission

Reviewer: [REDACTED] Follow-Up Type: *Not Required*

28f - Resident's Funds and 30-day Refund

1. Requirements

2600.

28.f. Within 30 days of either the termination of service by the home or the resident's leaving the home, the resident shall receive an itemized written account of the resident's funds, including notification of funds still owed the home by the resident or a refund owed the resident by the home. Refunds shall be made within 30 days of discharge.

Description of Violation

Resident #1 was discharged from the facility on [REDACTED] due to their need for an increased level of care. The home issued a refund check on [REDACTED].

Plan of Correction

Accept

The home understands the importance of this regulation is to ensure that the resident is informed of refunds due in a timely manner. The resident was in a nursing facility for a short term rehab stay. The facility was holding a bed for him. The nursing facility took a while to allow us to re-evaluate this resident and deem him a higher level of care. The administrator and business office will ensure that a resident that has their services terminated receives their refund within 30 days.

Completion Date: 04/26/2022

Document Submission

Implemented

The home understands the importance of this regulation is to ensure that the resident is informed of refunds due in a timely manner. The resident was in a nursing facility for a short term rehab stay. The facility was holding a bed for him. The nursing facility took a while to allow us to re-evaluate this resident and deem him a higher level of care. The administrator and business office will ensure that a resident that has their services terminated receives their refund within 30 days.

101j7 - Lighting/Operable Lamp

1. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

- 7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

Resident Room #10, bed located nearest to the door did not have a source of bed side lighting available to the resident.

Plan of Correction

Accept

The home understands the importance of this regulation. It ensures that residents have sufficient lights to move safely around their room in the dark, reducing the risk of falls and injuries. This resident prefers [REDACTED] bed against the wall. [REDACTED] keeps a flashlight attached to [REDACTED] clothing to use in place of the lamp next to his bed. At the time of the inspection, the inspector witnessed that [REDACTED] did in fact have a flashlight attached to [REDACTED] when she spoke with [REDACTED]. The administrator and environmental service department will ensure that all residents have access to a bedside lamp to ensure that there is enough lighting to move around their room safely. Administrator discussed this at the staff training held on May 24, 2022. See attached training document.

Completion Date: 05/24/2022

Document Submission

Implemented

The home understands the importance of this regulation. It ensures that residents have sufficient lights to move safely around their room in the dark, reducing the risk of falls and injuries. This resident prefers [REDACTED] bed against the wall. [REDACTED] keeps a flashlight attached to [REDACTED] clothing to use in place of the lamp next to [REDACTED] bed. At the time of the inspection, the inspector witnessed that he did in fact have a flashlight attached to him when [REDACTED] spoke with [REDACTED].

101j7 - Lighting/Operable Lamp (continued)

The administrator and environmental service department will ensure that all residents have access to a bedside lamp to ensure that there is enough lighting to move around their room safely. Administrator discussed this at the staff training held on May 24, 2022. See attached training document.

121a - Unobstructed Egress**1. Requirements**

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

The emergency fire exit located on the east side of the building that exited to the parking lot was blocked by residents storing their fishing equipment. There was a fishing pole, cooler, stool, and tackle box that was observed blocking the exit.

Plan of Correction

The home understands the importance of this regulation. It is important to keep exits unblocked so people can escape in an emergency situation. Administrator conducted a meeting with staff on May 24, 2022. All staff were instructed to monitor for obstructed stairways, passageways, and egress routes from rooms and from the building must be unlocked and unobstructed. See attached training document.

Completion Date: 05/24/2022

Accept**Document Submission**

The home understands the importance of this regulation. It is important to keep exits unblocked so people can escape in an emergency situation. Administrator conducted a meeting with staff on May 24, 2022. All staff were instructed to monitor for obstructed stairways, passageways, and egress routes from rooms and from the building must be unlocked and unobstructed. See attached training document.

Implemented**187a - Medication Record****1. Requirements**

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

Description of Violation

Resident #2's MAR was not initialed on 04/08/22 at 9:00AM that their Omega 3 Fish Oil cap. had been administered as ordered.

Plan of Correction

The home understands the importance of this regulation. It allows for the home's staff persons to be able to track all medications a resident receives and to ensure all medications are administered as prescribed. The homes lead medication technician and Co-administrator will monitor the MAR for missed initials by medication technicians. The administrator conducted a staff meeting held on May 24, 2022. Enclosed find the training documentation.

Completion Date: 05/24/2022

Accept**Document Submission**

The home understands the importance of this regulation. It allows for the home's staff persons to be able to track all medications a resident receives and to ensure all medications are administered as prescribed. The homes lead medication technician and Co-administrator will monitor the MAR for missed initials by medication technicians. The administrator conducted a staff meeting held on May 24, 2022. Enclosed find the training documentation.

Implemented