

Department of Human Services  
Bureau of Human Service Licensing

July 19, 2022

[REDACTED]  
FITZMAURICE COMMUNITY SERVICES INC  
[REDACTED]

RE: FITZMAURICE COMMUNITY  
SERVICES  
212 CARBON STREET  
LEHIGHTON, PA, 18235  
LICENSE/COC#: 24545

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/25/2022 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: FITZMAURICE COMMUNITY SERVICES License #: 24545 License Expiration: 06/24/2023  
Address: 212 CARBON STREET, LEHIGHTON, PA 18235  
County: CARBON Region: NORTHEAST

**Administrator**

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

**Legal Entity**

Name: FITZMAURICE COMMUNITY SERVICES INC  
Address: [REDACTED]  
Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: C 3 SP Date: 05/30/1991 Issued By: PALI

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 7 Waking Staff: 5

**Inspection Information**

Type: Partial Notice: Unannounced BHA Docket #:  
Reason: Complaint Exit Conference Date: 05/25/2022

**Inspection Dates and Department Representative**

05/25/2022 On Site [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: 8 Residents Served: 7

**Secured Dementia Care Unit**

In Home: No Area: Capacity: Residents Served:

**Hospice**

Current Residents: 0

**Number of Residents Who:**

Receive Supplemental Security Income: 4 Are 60 Years of Age or Older: 4  
Diagnosed with Mental Illness: 7 Diagnosed with Intellectual Disability: 1  
Have Mobility Need: 0 Have Physical Disability: 0

**Inspections / Reviews**

05/25/2022 - Partial

Lead Inspector: Corey Pica Follow-Up Type: POC Submission Follow-Up Date: 06/18/2022

Inspections / Reviews (*continued*)

06/11/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *06/15/2022*

06/23/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *06/27/2022*

07/19/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

42c - Treatment of Residents

1. Requirements

2600.  
42.c. A resident shall be treated with dignity and respect.

**Description of Violation**

*Staff Member A cursed at Resident 1 because they did not want to go to an appointment. This resident was not treated with dignity and respect.*

**Plan of Correction**

**Do Not Accept**

*On [REDACTED] 2022 Staff Member was terminated from their employment with FCS due to this incident as well as other ongoing issues/concerns.*

**Completion Date:** 06/10/2022

**Update:** 06/11/2022

*What steps have been put in place to prevent this from happening again?  
Who will monitor and ensure ongoing compliance?*

**Plan of Correction**

**Accept**

- On [REDACTED] 2022 Staff Member A was terminated from their employment with FCS due to this incident as well as other ongoing issues/concerns.*
- Going forward, to prevent this type of situation again, staff will continue to be trained on resident rights, both, upon hire, within their first 40 hours of employment and annually as well.*
- Administrator, Program Director and/or AVP will ensure ongoing compliance with this regulation.*

**Completion Date:** 06/20/2022

**Update:** 06/23/2022

**Document Submission**

**Implemented**

- On [REDACTED] 2022 Staff Member A was terminated from their employment with FCS due to this incident as well as other ongoing issues/concerns.*
- Going forward, to prevent this type of situation again, staff will continue to be trained on resident rights, both, upon hire, within their first 40 hours of employment and annually as well.*
- Administrator, Program Director and/or AVP will ensure ongoing compliance with this regulation.*

65a - FS Orientation 1st Day

1. Requirements

- 2600.
- 65.a. Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following:
1. Evacuation procedures.
  2. Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable.
  3. The designated meeting place outside the building or within the fire-safe area in the event of an actual fire.
  4. Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable.
  5. The location and use of fire extinguishers.

65a - FS Orientation 1st Day (continued)

**Description of Violation**

Direct Care Staff Member A was hired on [REDACTED]/2022. There was no documentation that they were trained on or prior to their first workday in general fire safety and emergency preparedness.

**Plan of Correction**

**Accept**

- Staff Member A was trained by AVP, Lisa Eisenbach on [REDACTED]/2022 in general fire safety and emergency preparedness. Staff Member A did not sign checklist indicating they were trained in these areas.
- Administrator, Program Director and/or AVP will ensure all training documents are signed at the time of training/instruction going forward.
- Administrator, Program Director and/or AVP will ensure ongoing compliance with this regulation.

**Completion Date:** 06/10/2022

**Document Submission**

**Implemented**

- Staff Member A was trained by AVP, Lisa Eisenbach on [REDACTED]/2022 in general fire safety and emergency preparedness. Staff Member A did not sign checklist indicating they were trained in these areas.
- Administrator, Program Director and/or AVP will ensure all training documents are signed at the time of training/instruction going forward.
- Administrator, Program Director and/or AVP will ensure ongoing compliance with this regulation.

65b - Rights/Abuse 40 Hours

1. Requirements

2600.

65.b. Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following:

1. Resident rights.
2. Emergency medical plan.
3. Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P.S. § § 10225.101—10225.5102).
4. Reporting of reportable incidents and conditions.

**Description of Violation**

Direct care Staff Member A was hired on [REDACTED]/2022. There was no documentation that they received orientation prior to working 40 hours in resident rights, emergency medical plan, mandatory reporting, or reportable incidents.

**Plan of Correction**

**Accept**

- Staff Member A was trained by AVP, Lisa Eisenbach on [REDACTED]/2022 and [REDACTED]/2022 on resident rights, emergency medical plan, mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P.S. § § 10225.101 10225.5102) and reporting of reportable incidents and conditions. Staff Member A did not sign checklist indicating they were trained in these areas.
- Administrator, Program Director and/or AVP will ensure all training documents are signed at the time of training/instruction going forward.
- Administrator, Program Director and/or AVP will ensure ongoing compliance with this regulation.

**Completion Date:** 06/10/2022

**Document Submission**

**Implemented**

- Staff Member A was trained by AVP, Lisa Eisenbach on [REDACTED]/2022 and [REDACTED]/2022 on resident rights, emergency

*65b - Rights/Abuse 40 Hours (continued)*

*medical plan, mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P.S. §§ 10225.101—10225.5102) and reporting of reportable incidents and conditions. Staff Member A did not sign checklist indicating they were trained in these areas.*

- Administrator, Program Director and/or AVP will ensure all training documents are signed at the time of training/instruction going forward.*
- Administrator, Program Director and/or AVP will ensure ongoing compliance with this regulation.*