

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

March 9, 2023

[REDACTED]
ARTMAN LUTHERAN HOME
250 BETHLEHEM PIKE
AMBLER, PA, 19002

RE: ARTMAN LUTHERAN HOME
250 BETHLEHEM PIKE
AMBLER, PA, 19002
LICENSE/COC#: 12778

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/02/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: ARTMAN LUTHERAN HOME License #: 12778 License Expiration: 02/08/2023
 Address: 250 BETHLEHEM PIKE, AMBLER, PA 19002
 County: MONTGOMERY Region: SOUTHEAST

Administrator

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

Legal Entity

Name: ARTMAN LUTHERAN HOME
 Address: 250 BETHLEHEM PIKE, AMBLER, PA, 19002
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-1 Date: 02/08/1994 Issued By: CWOPA

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 198 Waking Staff: 149

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Incident Exit Conference Date: 11/02/2022

Inspection Dates and Department Representative

11/02/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 136 Residents Served: 123

Secured Dementia Care Unit
 In Home: Yes Area: 1st floor Capacity: 19 Residents Served: 18

Hospice
 Current Residents: 3

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 123
 Diagnosed with Mental Illness: 3 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 75 Have Physical Disability: 2

Inspections / Reviews

11/02/2022 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 12/10/2022

12/08/2022 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 03/08/2023
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 12/13/2022

Inspections / Reviews (*continued*)

12/13/2022 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 03/08/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 01/31/2023

03/09/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/08/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [REDACTED], while providing incontinence care, staff member A heard resident #1 hollering. Staff member A walked into the room to see if they could help, and witnessed staff member B standing over resident #1. Resident #1 grabbed staff member B's arm. Staff member B pulled their arm from the resident's grasp and yelled at the resident "you will never scratch me again". Staff member B then slapped resident#1's arms three times while resident#1 yelled "please stop, please stop".

Repeated Violation: 7/29/22

Plan of Correction

Accept (CM - 12/13/2022)

It is the policy of Artman Lutheran Home to remove any staff member after an accusation of abuse. Staff member B was suspended pending investigation on [REDACTED] and terminated [REDACTED]. Staff to be in-serviced on 12/14/22, by the Administrator, on de-escalation and redirection techniques. The in-service will include prevention methodology and non-violent self-protection techniques.

Licensee's Proposed Overall Completion Date: 12/14/2022

Implemented (CM - 03/09/2023)

201 - Positive Interventions

2. Requirements

2600.

201. Safe Management Techniques - The home shall use positive interventions to modify or eliminate a behavior that endangers the resident himself or others. Positive interventions include improving communications, reinforcing appropriate behavior, redirection, conflict resolution, violence prevention, praise, deescalation techniques and alternative techniques or methods to identify and defuse potential emergency situations.

Description of Violation

On [REDACTED] Resident #1 grabbed and scratched staff member B's arm. Staff member B responded by slapping the resident's arms three times. Staff member B did not implement positive interventions to modify or eliminate the resident's behavior.

Plan of Correction

Accept (CM - 12/13/2022)

It is the policy of Artman Lutheran Home to use positive interventions to modify behaviors that may endanger the resident or others. Staff member B was suspended pending investigation on [REDACTED] and terminated 10/28/22. Staff to be in-serviced 12/14/22 by the Administrator on de-escalation and redirection techniques

Licensee's Proposed Overall Completion Date: 12/14/2022

Implemented (CM - 03/09/2023)

234b - Support Plan Needs Elements

3. Requirements

234b - Support Plan Needs Elements (*continued*)

2600.

234.b. The support plan must identify the resident's physical, medical, social, cognitive and safety needs.

Description of Violation

The support plan, dated [REDACTED] for resident #1 does not address enabler for mobility at bedside.

Plan of Correction**Accept (CM - 12/13/2022)**

: It is the policy of Artman Lutheran Home to identify resident's physical, medical, social, cognitive and safety needs in the support plan. [REDACTED]-Resident #1 support plan updated by the Administrator to include use of enabler. 12/5/22 the Administrator In-serviced Unit Managers on identifying needs on the support plan. Support plans for all residents will be revised with any significant change and annually by the Unit Manager or Administrator. Unit Manager and or Administrator will audit 10 support plans per month for 3 months starting 12/15/2022 until compliance is achieved.

Licensee's Proposed Overall Completion Date: 02/15/2023

Implemented (CM - 03/09/2023)

234d - Support Plan Revision

4. Requirements

2600.

234.d. The support plan shall be revised at least annually and as the resident's condition changes.

Description of Violation

A support plan for resident #1 was completed on [REDACTED] however, on [REDACTED] and again on [REDACTED], the resident exhibited aggressive behaviors. The resident's support plan has not been revised to identify and develop a plan to address the behaviors.

Plan of Correction**Accept (CM - 12/13/2022)**

It is the policy of Artman Lutheran Home to revise support plans annually and as the resident's condition changes. [REDACTED]-Resident #1 support plan updated by the Administrator to address a plan when aggressive behaviors are exhibited. 12/5/22 the Administrator In-serviced Unit Managers on policy to update support plans. Unit Manager and or Administrator will audit 10 support plans per month for 3 months starting 12/15/2022 until compliance is achieved.

Licensee's Proposed Overall Completion Date: 02/15/2023

Implemented (CM - 03/09/2023)