

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

December 23, 2022

[REDACTED]
INSINGER'S PERSONAL CARE HOME INC
[REDACTED]

RE: INSINGER'S BOARDING HOME
673 CAMPBELL STREET
WILLIAMSPORT, PA, 17701
LICENSE/COC#: 20210

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/22/2022 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: *INSINGER'S BOARDING HOME* License #: *20210* License Expiration: *11/24/2022*
 Address: *673 CAMPBELL STREET, WILLIAMSPORT, PA 17701*
 County: *LYCOMING* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *INSINGER'S PERSONAL CARE HOME INC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C 2 LP* Date: *03/05/1985* Issued By: *PALI*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *8* Waking Staff: *6*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #: [REDACTED]
 Reason: *Renewal* Exit Conference Date: *11/22/2022*

Inspection Dates and Department Representative

11/22/2022 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *20* Residents Served: *8*

Secured Dementia Care Unit
 In Home: *No* Area: [REDACTED] Capacity: [REDACTED] Residents Served: [REDACTED]

Hospice
 Current Residents: *0*

Number of Residents Who:
 Receive Supplemental Security Income: *8* 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

11/22/2022 - Full
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *12/17/2022*

12/13/2022 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *12/19/2022*
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *12/20/2022*

Inspections / Reviews *(continued)*

12/23/2022 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/19/2022

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 Care Facility Carbon Monoxide Alarms Standard Act requires that all CO2 detectors operating with a battery be changed annually and dated with battery installation date. The battery installation dated for the CO2 detector in the basement was 9/11/2019.

Plan of Correction

Accept (████) - 12/13/2022)

The administrator will be in charge of changing the batteries in the smoke detectors and carbon monoxide detectors. All batteries will be replaced the first week in September of every year. Marking my calendar for the battery change date will ensure that this is done in a timely manner every year.

Keeping all detectors with an updated battery will ensure the safety of the residents.

Corrected at time of inspection

Licensee's Proposed Overall Completion Date: 12/13/2022

Implemented (████) 12/20/2022)

88a - Surfaces

2. Requirements

2600.

88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

The vanity located in the 2nd floor bathroom had holes going through the 2 doors that left jagged pieces of wood which are a hazard.

Plan of Correction

Accept (████) - 12/13/2022)

The administrator will be responsible for keeping the home in good repair and free of hazards. A walk through of the home at the beginning of every month will help ensure that this violation is not cited again.

The vanity has been replaced, correcting the violation.

Keeping the home in good repair helps minimize the risk of injury to residents and provides dignified living conditions

Licensee's Proposed Overall Completion Date: 12/13/2022

Implemented (████) 12/20/2022)

89b - Hot Water Temperature

3. Requirements

2600.

89.b. Hot water temperature in areas accessible to the resident may not exceed 120°F.

Description of Violation

The hot water temperature from the 2nd floor bathroom was 136.2 degrees. This is a repeat violation from 10/14/2021.

Plan of Correction

Accept (████) - 12/13/2022)

The administrator will check the water temperature monthly to make sure it does not exceed 120 degrees to help

89b - Hot Water Temperature (continued)

alleviate a reoccurring citation.

A handyman came in to turn the water temperature down and it was checked every other day for a week by the administrator to make sure it was within the states guidelines.

Keeping the water temperature regulated will prevent residents from accidental scalding.

Licensee's Proposed Overall Completion Date: 12/13/2022

Implemented [redacted] - 12/20/2022)

93a - Handrails

4. Requirements

2600.

93.a. Each ramp, interior stairway and outside steps must have a well-secured handrail.

Description of Violation

The railing on the interior stairway leading from the 1st floor to the 2nd floor is loose and not firmly secured in the middle portion of the railing.

Plan of Correction

Accept [redacted] - 12/13/2022)

The administrator will be responsible in making sure all handrails are secure within the home. During [redacted] monthly walk through at the beginning of each month will help ensure that the home is always in good condition.

The railings have been fixed and are now up to standards.

Keeping railings sturdy provides safety from falls and safe evacuations during emergencies.

Licensee's Proposed Overall Completion Date: 12/13/2022

Implemented [redacted] - 12/20/2022)

125a - Combustible Storage

5. Requirements

2600.

125.a. Combustible and flammable materials may not be located near heat sources or hot water heaters.

Description of Violation

There were bed sheets observed behind the dryer on the dryer's exhaust vent.

Plan of Correction

Accept [redacted] - 12/13/2022)

The administrator will check periodically during the month to make sure there are no combustibles around the dryer. Staff has been instructed to check daily after each load to make sure it is always clean around the washer and dryer.

Keeping the area around the dryer can help alleviate ignited heat sources and prevent fires.

Corrected at time of inspection.

Licensee's Proposed Overall Completion Date: 12/13/2022

Implemented ([redacted] - 12/20/2022)

132b - Safety Inspection/Fire Drill

6. Requirements

2600.

132b - Safety Inspection/Fire Drill (continued)

132.b. A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.

Description of Violation

The most current fire inspection and drill completed by a fire safety expert was done on 10/19/2022. The previous one was completed more than 1 year prior on 7/29/2021.

Plan of Correction

Accept [REDACTED] - 12/13/2022)

The administrator will make sure that a fire drill with the fire company is done in a timely manner. [REDACTED] will achieve this by calling the fire company 2 months before the drill is due. This will cover a late drill if the fire company is booked or behind.

Having a yearly fire drill with the fire company helps identify unsafe conditions, helps prevent a fire and teaches staff and residents the proper protocol when the alarm goes off.

Licensee's Proposed Overall Completion Date: 12/13/2022

Implemented [REDACTED] - 12/20/2022)

144c1 - Smoking Area Guidelines**7. Requirements**

2600.

144.c. A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures that include the following:

Description of Violation

There were approximately 20 to 30 cigarette butts observed in the grass adjacent to the home's smoking area on the front porch.

Plan of Correction

Accept [REDACTED] - 12/13/2022)

The administrator will make sure that residents cigarette butts are not thrown in the front yard off of the porch.

Residents were told to use the ashtrays during an announcement made at lunch time.

Staff on second shift will also check daily to make sure there are no butts in the yard.

By following the above actions will help ensure fire safety and unsafe smoking.

Licensee's Proposed Overall Completion Date: 12/13/2022

Implemented [REDACTED] - 12/20/2022)

252 - Record Content**8. Requirements**

2600.

252. Content of Resident Records - Each resident's record must include the following information:

3. A photograph of the resident that is no more than 2 years old.

Description of Violation

The most current picture of Resident 1 was taken more than 2 years prior [REDACTED]

Plan of Correction

Accept [REDACTED] - 12/13/2022)

The administrator will be responsible for ensuring that a current picture of a resident is available at all times.

Every January the administrator will take new pictures of all residents. Having a plan to ensure current pictures will benefit the home by keeping all updated information in the home.

Licensee's Proposed Overall Completion Date: 12/13/2022

252 - Record Content (*continued*)

Implemented ([REDACTED] - 12/20/2022)