

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

January 17, 2023

[REDACTED], ADMINISTRATOR  
RENAISSANCE HOME FORKS LLC  
2222 SULLIVAN TRAIL  
EASTON, PA, 18040

RE: RENAISSANCE HOME FORKS  
2222 SULLIVAN TRAIL  
EASTON, PA, 18040  
LICENSE/COC#: 22692

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/14/2022 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:** RENAISSANCE HOME FORKS **License #:** 22692 **License Expiration:** 05/23/2023  
**Address:** 2222 SULLIVAN TRAIL, EASTON, PA 18040  
**County:** NORTHAMPTON **Region:** NORTHEAST

**Administrator**

**Name:** [REDACTED] **Email:** [REDACTED]

**Legal Entity**

**Name:** RENAISSANCE HOME FORKS LLC  
**Address:** 2222 SULLIVAN TRAIL, EASTON, PA, 18040  
**Phone:** [REDACTED] **Email:** [REDACTED]

**Certificate(s) of Occupancy**

**Type:** C 2 LP **Date:** 07/29/2002 **Issued By:** L&I

**Staffing Hours**

**Resident Support Staff:** 0 **Total Daily Staff:** 28 **Waking Staff:** 21

**Inspection Information**

**Type:** Partial **Notice:** Unannounced **BHA Docket #:**  
**Reason:** Complaint, Incident **Exit Conference Date:** 12/14/2022

**Inspection Dates and Department Representative**

12/14/2022 On Site [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information			
<b>License Capacity:</b> 61	<b>Residents Served:</b> 26		
Secured Dementia Care Unit			
<b>In Home:</b> No	<b>Area:</b>	<b>Capacity:</b>	<b>Residents Served:</b>
Hospice			
<b>Current Residents:</b> 1			
Number of Residents Who:			
<b>Receive Supplemental Security Income:</b> 0	<b>Are 60 Years of Age or Older:</b> 26		
<b>Diagnosed with Mental Illness:</b> 1	<b>Diagnosed with Intellectual Disability:</b> 2		
<b>Have Mobility Need:</b> 2	<b>Have Physical Disability:</b> 0		

**Inspections / Reviews**

12/14/2022 - Partial  
**Lead Inspector:** [REDACTED] **Follow Up Type:** POC Submission **Follow Up Date:** 01/01/2023

Inspections / Reviews (*continued*)

01/03/2023 POC Submission

Submitted By: [REDACTED] Date Submitted: 01/16/2023  
Reviewer: [REDACTED] Follow Up Type: POC Submission Follow Up Date: 01/09/2023

01/11/2023 POC Submission

Submitted By: [REDACTED] Date Submitted: 01/16/2023  
Reviewer: [REDACTED] Follow Up Type: Document Submission Follow Up Date: 01/16/2023

01/17/2023 Document Submission

Submitted By: [REDACTED] Date Submitted: 01/16/2023  
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

Resident #1 was seen by resident #2 touching resident #3 inappropriately on the breast on or around [REDACTED]. Resident #2 told resident #1 to stop and resident #1 told resident #2 to shut up. This is a repeat violation from 11/1/22.

Plan of Correction

Accepted [REDACTED] - 01/11/2023)

The administrator is responsible to find alternate placement for resident #1, and in the meantime the staff are making frequent rounds through the sitting room, as per our plan with Department of Aging. The administrator has found another personal care home in the area that will accept resident #1 and the move is being arranged for this week.

Licensee's Proposed Overall Completion Date: 01/14/2023

Implemented [REDACTED] - 01/17/2023)

42c Treatment of Residents

2. Requirements

2600.

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

Description of Violation

It was determined through resident interview with resident #4 that staff person A called resident #4 a pain in the ass after resident #4 demanded to have their medication [REDACTED] administered with the [REDACTED] medications on [REDACTED]. The Medication Administration Record (MAR) indicates this medication has been administered at [REDACTED] since [REDACTED] when resident #4 discussed taking the medication earlier with their doctor.

Plan of Correction

Accepted [REDACTED] - 01/11/2023)

The administrator is responsible for fixing the problem. Resident #4 had a history of making false accusations and wanting complete control over her own medication, but this was not reflected in [REDACTED] RASP. The administrator has added an addendum to the RASP to reflect repeated behaviors that affect her medication management. To ensure ongoing compliance, the administrator will randomly audit 2 RASPS each week for the next 8 weeks to check for accurate behavior issues that affect care.

Licensee's Proposed Overall Completion Date: 03/14/2023

Implemented [REDACTED] - 01/17/2023)

227d Support Plan Medical/Dental

3. Requirements

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

227d Support Plan Medical/Dental (continued)

**Description of Violation**

Resident #1's support plan dated [REDACTED] was not updated to reflect that resident #1 requires additional supervision due to an incident in which resident #1 touched resident #3 inappropriately on [REDACTED]. The support plan did not include a plan to supervise the resident due to this incident and additional problematic behaviors, nor was it updated regarding the [REDACTED] incident.

**Plan of Correction**

Accept ( [REDACTED] - 01/11/2023)

The administrator is responsible for making sure the the RASPS are updated to reflect significant changes. The administrator has updated the RASP for resident #1 and for resident #3 to reflect the staff making rounds through the TV room. The administrator is responsible for ongoing compliance, and will monitor the completion of RASPs by randomly auditing 2 charts per week to check for updates and addendums for the next 8 weeks.

Licensee's Proposed Overall Completion Date: 03/14/2023

Implemented [REDACTED] - 01/17/2023)

227g -Support Plan Signatures

**4. Requirements**

2600.

227.g. Individuals who participate in the development of the support plan shall sign and date the support plan.

**Description of Violation**

The support plan dated [REDACTED] for resident #4 was not signed by the resident or by the staff person completing the form.

**Plan of Correction**

Accept ( [REDACTED] - 01/11/2023)

The administrator is responsible for making sure that RASPS are signed. Action: the administrator will randomly audit 2 charts per week for the next 8 weeks to check for completion of the signature pages on resident RASPs. The administrator will monitor ongoing compliance.

Licensee's Proposed Overall Completion Date: 03/14/2023

Implemented [REDACTED] 01/17/2023)