

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

August 4, 2023

[REDACTED], VP OF OPERATIONS  
HOMEWOOD AT SPRING HOUSE ESTATES INC  
[REDACTED]

RE: VICTORIA HOUSE AT SPRING  
HOUSE ESTATES  
150 VICTORIA AVENUE  
EVERETT, PA, 15537  
LICENSE/COC#: 33510

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/26/2023 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:** VICTORIA HOUSE AT SPRING HOUSE ESTATES      **License #:** 33510      **License Expiration:** 09/19/2023  
**Address:** 150 VICTORIA AVENUE, EVERETT, PA 15537  
**County:** BEDFORD      **Region:** CENTRAL

## Administrator

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

## Legal Entity

**Name:** HOMEWOOD AT SPRING HOUSE ESTATES INC  
**Address:** [REDACTED]  
**Phone:** [REDACTED]      **Email:** [REDACTED]

## Certificate(s) of Occupancy

**Type:** Other      **Date:** 09/14/2009      **Issued By:**

## Staffing Hours

**Resident Support Staff:** 0      **Total Daily Staff:** 26      **Waking Staff:** 20

## Inspection Information

**Type:** Full      **Notice:** Unannounced      **BHA Docket #:**  
**Reason:** Renewal      **Exit Conference Date:** 06/26/2023

## Inspection Dates and Department Representative

06/26/2023 - On-Site: [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

**License Capacity:** 42      **Residents Served:** 18

## Secured Dementia Care Unit

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

## Hospice

**Current Residents:** 1

## Number of Residents Who:

**Receive Supplemental Security Income:** 0      **Are 60 Years of Age or Older:** 18  
**Diagnosed with Mental Illness:** 3      **Diagnosed with Intellectual Disability:** 0  
**Have Mobility Need:** 8      **Have Physical Disability:** 0

## Inspections / Reviews

06/26/2023 Full

**Lead Inspector:** [REDACTED]      **Follow-Up Type:** POC Submission      **Follow-Up Date:** 07/16/2023

07/14/2023 - POC Submission

**Submitted By:** [REDACTED] Cottle      **Date Submitted:** 07/31/2023  
**Reviewer:** [REDACTED]      **Follow-Up Type:** Document Submission      **Follow-Up Date:** 07/31/2023

Inspections / Reviews *(continued)*

08/04/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 07/31/2023

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

## 183b - Meds and Syringes Locked

## 1. Requirements

2600.

183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

## Description of Violation

On [REDACTED] at approximately [REDACTED], an [REDACTED] inhaler, which is prescribed for Resident #1, was observed unlocked, unattended, and accessible on Resident #1's bedside stand. The door to the room was unlocked and the resident was in an activity and not in the room at this time.

## Plan of Correction

Accept ([REDACTED] - 07/14/2023)

Facility will ensure that all residents who self administer medications keep meds locked and safe from all residents in the home. All residents were educated on keeping medications locked on 6/20/23 at Resident Council Meeting. Staff were educated on importance of checking residents' medications who self-administer and providing reminders to keep medications locked on 6/27/23. Staff and residents were educated by Mandi Cottle and Nicole Smithmyer. An audit will be conducted monthly beginning July 2023 for a six month period to ensure all self-medicating residents are keeping medication locked at all times. Locked boxes will also be offered to residents who prefer to keep room door unlocked. This will be corrected by July 31, 2023. Audit will be completed by Director of Resident Services, Nicole Smithmyer.

Licensee's Proposed Overall Completion Date: 07/31/2023

Implemented ([REDACTED] - 08/02/2023)

## 187d - Follow Prescriber's Orders

## 2. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

## Description of Violation

Resident #1 has an order to have weight checked daily and to notify the cardiologist if the resident gains more than 3 pounds in 24 hours or more than 5 pounds anytime. On [REDACTED] the home failed to check the resident's weight.

## Plan of Correction

Accept ([REDACTED] - 07/14/2023)

To ensure all orders are followed by the prescriber, the Resident Services Director, [REDACTED], held a training session with staff on 6/27/23. Staff were reminded on the importance of the use of the existing "Missed Medication Signature Page". An audit will be conducted monthly beginning July 2023 for a six month period to ensure all staff are utilizing the Missed Medication Signature Page and that no further missed signatures are found. Corrective action will be provided to staff if Prescriber orders are not followed.

Licensee's Proposed Overall Completion Date: 07/31/2023

Implemented ([REDACTED] - 08/02/2023)

## 227d - Support Plan Medical/Dental

## 3. Requirements

2600.

**227d Support Plan Medical/Dental (continued)**

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.

**Description of Violation**

Resident #2's RASP, dated [REDACTED], indicates resident is independent for transferring in and out of bed and for turning and positioning in bed. However, Resident #2 uses bedrails and has 4 half rails on his/her bed.

**Plan of Correction****Accept [REDACTED] - 07/14/2023)**

Resident Services Director, [REDACTED], will review all RASPs prior to signature with resident to ensure all items listed are up to date. Monthly checklist will be completed on all RASPs for one year beginning in July 2023. This will ensure that all items listed on the RASP are correct and up to date in a timely manner.

Licensee's Proposed Overall Completion Date: 07/31/2023

**Implemented ([REDACTED] - 08/03/2023)**