

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

August 17, 2023

[REDACTED], ADMIN
LUTHERCARE INC
[REDACTED]

RE: THE MUHLENBERG LODGE
300 ST. MARK AVENUE
LITITZ, PA, 17543
LICENSE/COC#: 32182

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/12/2023 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: THE MUHLENBERG LODGE License #: 32182 License Expiration: 03/13/2024
Address: 300 ST. MARK AVENUE, LITITZ, PA 17543
County: LANCASTER Region: CENTRAL

Administrator

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

Legal Entity

Name: LUTHERCARE INC
Address: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 03/23/1999 Issued By: L & I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 98 Waking Staff: 74

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #: 0
Reason: Incident Exit Conference Date: 07/12/2023

Inspection Dates and Department Representative

07/12/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 90 Residents Served: 71

Secured Dementia Care Unit

In Home: Yes Area: SDU Capacity: 30 Residents Served: 27

Hospice

Current Residents: 1

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 71
Diagnosed with Mental Illness: 1 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 27 Have Physical Disability: 0

Inspections / Reviews

07/12/2023 Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 07/23/2023

07/26/2023 - POC Submission

Submitted By: [REDACTED] Date Submitted: 08/17/2023
Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 07/31/2023

Inspections / Reviews *(continued)*

08/17/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/17/2023

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

16c - Written Incident Report

1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On [REDACTED], at approximately [REDACTED], Staff member A asked Staff member B to assist Resident 1 to the bathroom. Staff member B responded to the request with "no we are not going to help her; she does that all the time". This resulted in Resident 1 having an accident. The home did not report this incident to the department until [REDACTED]

Plan of Correction

Accept [REDACTED] - 07/26/2023)

Immediate response: The ancillary staff that reported the incident on the staff phone on Saturday was educated from Administrator on where to locate the Administrator's phone number so she can call Administrator and report this immediately.

Current - All-Staff education being held on 7/25/2023 at 7am, 2pm, and 3:15pm for Abuse Reporting held by Administrator and Clinical Care Coordinator.

Future: Abuse Education will be reviewed at every monthly All-staff meeting starting August 2023 to December 2023.

Licensee's Proposed Overall Completion Date: 12/05/2023

Implemented [REDACTED] - 08/17/2023)

85a - Sanitary Conditions

2. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

On 07/12/23, a pungent odor of urine was detected upon entry into Resident room # 618.

Plan of Correction

Accept [REDACTED] - 07/26/2023)

Immediate response: Housekeeping cleaned the apartment, removing all trash from Incontinence episodes. Direct Care Staff washed clothes that were soiled. Administrator spoke with Resident about the incontinence. Also, spoke with staff to see what was tried and did not work. This part was completed on 7/12 & 13/2023.

Current - Administrator met with resident 7/24/2023 at 11am in regard to sanitation with incontinence and proper handling of soiled clothing and incontinent products.

Current - Administrator spoke with Resident and POA. Clinical Care Coordinator requested Therapy Services and Psych services for eval and treat from PCP 7/24/2023.

Future - Currently Direct Care Staff have room inspections monthly. Administrator will add smell/sanitation on this Room audit check list on 7/25/2023 as continued measure for future prevention.

Licensee's Proposed Overall Completion Date: 07/28/2023

Implemented [REDACTED] - 08/17/2023)