

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

August 25, 2023

[REDACTED], ADMINISTRATOR
9 JUSTIN DRIVE OPERATING COMPANY, LLC
[REDACTED]
[REDACTED]

RE: VINTAGE KNOLLS
9 JUSTIN DRIVE
DANVILLE, PA, 17821
LICENSE/COC#: 23094

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/27/2023 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: VINTAGE KNOLLS

License #: 23094

License Expiration:

Address: 9 JUSTIN DRIVE, DANVILLE, PA 17821

County: MONTOUR

Region: NORTHEAST

Administrator

Name: [REDACTED]

Phone:

Email: [REDACTED]

Legal Entity

Name: 9 JUSTIN DRIVE OPERATING COMPANY, LLC

Address: [REDACTED]

Phone:

Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP

Date: 04/15/2019

Issued By: L&I

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 63

Waking Staff: 47

Inspection Information

Type: Partial

Notice: Announced

BHA Docket #:

Reason: Complaint, Change Legal Entity

Exit Conference Date: 07/27/2023

Inspection Dates and Department Representative

07/27/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity:

Residents Served: 57

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 57

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 6

Have Physical Disability: 1

Inspections / Reviews

07/27/2023 Partial

Lead Inspector: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 08/12/2023

08/08/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 08/10/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission

Follow-Up Date: 08/14/2023

Inspections / Reviews *(continued)*

08/25/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/10/2023

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

42c - Treatment of Residents

1. Requirements

2600.
42.c. A resident shall be treated with dignity and respect.

Description of Violation

Through information received from a complaint and staff interviews it was determined that staff person A frequently yells loudly at resident #1. Staff interviews indicate staff person A has told resident #1 loudly to "Get up" during morning care and has yelled at resident #1 for not remembering how to get back to their room.

Plan of Correction **Accept** (█ - 08/08/2023)

A resident shall be treated with dignity and respect. Through information received from a complaint and staff interviews it was determined that staff person A frequently yells loudly at resident #1. Staff interviews indicate staff person A has told resident #1 loudly to "Get up" during morning care and has yelled at resident #1 for not remembering how to get back to their room. The DOW has an education that she has gone over with █ educating her on how to speak to a resident in a lower and softer tone. █ has signed the education in acknowledgment of the education.

Licensee's Proposed Overall Completion Date: 08/02/2023

Implemented (█ - 08/24/2023)

95 - Furniture and Equipment

2. Requirements

2600.
95. Furniture and Equipment - Furniture and equipment must be in good repair, clean and free of hazards.

Description of Violation

In resident room 224 there was an enabler bar in use with a gap between the bars approximately 8 inches wide. The enabler bar did not have a cover over it to guard against possible limb entrapment. Also, the bar was affixed to the bed via a board that slides between the mattresses and was not securely attached to the bed itself to prevent sliding out.

Plan of Correction **Accept** (█ - 08/08/2023)

Furniture and Equipment - Furniture and equipment must be in good repair, clean and free of hazards. In resident room 224 there was an enabler bar in use with a gap between the bars approximately 8 inches wide. The enabler bar did not have a cover over it to guard against possible limb entrapment. Also, the bar was affixed to the bed via a board that slides between the mattresses and was not securely attached to the bed itself to prevent sliding out. Family and resident were educated on the possible dangers of the enabler bar. They state that they understand but want to keep the bar on the bed for the resident to feel more comfortable about getting in and out of bed. A new enabler bar was bought and affixed to the bed. The maintenance director will be responsible for the next 3 months to check the mobility device monthly to ensure that it is in good condition, and it is secure to the bed.

Licensee's Proposed Overall Completion Date: 08/02/2023

Implemented (█ - 08/24/2023)

96a - First Aid Kit

3. Requirements

2600.
96.a. The home shall have a first aid kit that includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers.

96a First Aid Kit (continued)

Description of Violation

The first aid kit located at the 2nd floor nurse's station was missing scissors.

Plan of Correction

Accept (█ - 08/08/2023)

The home shall have a first aid kit that includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers. The first aid kit located at the 2nd floor nurse's station was missing scissors. New first aid kits were bought and replaced the old first aid kit. The activities director will be responsible for the next 3 months for making sure that the first aid kits have all necessary equipment in the kit.

Licensee's Proposed Overall Completion Date: 08/02/2023

Implemented (█ - 08/24/2023)

121a - Unobstructed Egress

4. Requirements

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

The activity room exit door did not open without using excessive force against the push bar.

Plan of Correction

Accept (█ - 08/08/2023)

Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed. The activity room exit door did not open without using excessive force against the push bar. Stauffers door service was called, and they have ordered the parts for the door to keep in from sticking. They state that they will fix the door as soon as the part comes in. The Activities Director is in charge of opening the door every morning for the next 3 months to ensure that the door is properly working.

Licensee's Proposed Overall Completion Date: 08/03/2023

Implemented (█ - 08/24/2023)

132e - Fire Drill Sleeping Hours

5. Requirements

2600.

132.e. A fire drill shall be held during sleeping hours once every 6 months.

Description of Violation

The home's last sleeping hour fire drill was conducted on 11/23/22, more than six months ago.

Plan of Correction

Accept (█ - 08/08/2023)

A fire drill shall be held during sleeping hours once every 6 months. A fire drill shall be held during sleeping hours once every 6 months. The home's last sleeping hour fire drill was conducted on 11/23/22, more than six months ago. On 07/28/2023 at 1am the maintenance director completed a fire drill for the night shift. A schedule will be drawn up by the Maintenance director that will tell him a head of time what month he will be conducting the night shift fire drill for the next year.

Licensee's Proposed Overall Completion Date: 08/02/2023

Implemented (█ - 08/24/2023)

132g - Fire Drills Days/Times**6. Requirements**

2600.

132.g. Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

Description of Violation

Based on a review of fire drill logs, the home is routinely scheduling fire drills towards the end of the month. Fire drills were conducted on the following dates: 11/23/22, 12/31/22, 1/26/23, 2/21/23, 3/24/23, 4/26/23, 5/31/23, and 6/26/23.

Plan of Correction**Accept (█ - 08/08/2023)**

Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low. Based on a review of fire drill logs, the home is routinely scheduling fire drills towards the end of the month. Fire drills were conducted on the following dates: 11/23/22, 12/31/22, 1/26/23, 2/21/23, 3/24/23, 4/26/23, 5/31/23, and 6/26/23. A schedule will be drawn up by the Maintenance director that will tell him a head of time what month he will be conducting the night shift fire drill. For the next 6 months.

Licensee's Proposed Overall Completion Date: 08/02/2023**Implemented (█ - 08/24/2023)**