

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

November 17, 2023

[REDACTED], ADMINISTRATOR  
FAIRMOUNT HOMES  
[REDACTED]

RE: FAIRMOUNT HOMES - FARM CREST  
1100 FARM CREST DRIVE  
EPHRATA, PA, 17522  
LICENSE/COC#: 32198

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/03/2023 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: FAIRMOUNT HOMES - FARM CREST License #: 32198 License Expiration: 05/18/2024  
 Address: 1100 FARM CREST DRIVE, EPHRATA, PA 17522  
 County: LANCASTER Region: CENTRAL

**Administrator**

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

**Legal Entity**

Name: FAIRMOUNT HOMES  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: C-2 LP Date: 08/06/1998 Issued By: Labor and Industry

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 29 Waking Staff: 22

**Inspection Information**

Type: Full Notice: Unannounced BHA Docket #:  
 Reason: Renewal Exit Conference Date: 10/03/2023

**Inspection Dates and Department Representative**

10/03/2023 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 38 Residents Served: 27  
 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: 27  
 Diagnosed with Mental Illness: 2 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 2 Have Physical Disability: 1

**Inspections / Reviews**

10/03/2023 Full  
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 10/22/2023

10/30/2023 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: 11/08/2023  
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 11/07/2023

Inspections / Reviews (*continued*)

## 11/06/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/08/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 11/14/2023

## 11/17/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/08/2023

Reviewer: [REDACTED]

Follow Up Type: Not Required

89b - Hot Water Temperature

1. Requirements

2600.

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

Description of Violation

On 10/3/23, the hot water temperature in the community restroom on the 1st floor by the office measured 123.5 degrees Fahrenheit.

On 10/3/23, the hot water temperature in the community restroom on the 1st floor by the community room measured 122.3 degrees Fahrenheit.

On 10/3/23, the hot water temperature in the community restroom on the ground floor by the community room measured 123.8 degrees Fahrenheit.

Plan of Correction

Accept [redacted] 11/06/2023)

2600.89b Hot water temperature in areas accessible to the resident may not exceed 120°F.

Description of Violation

On 10/3/23 during inspection:

- The water temperature was immediately reduced on the water heater for the building on 10/3/2023.
- The water temperature was rechecked using housekeeping staff's thermometer and it was discovered that thermometer's results were not consistent. New batteries were installed in thermometer and results were consistently revealing temperatures of 120 degrees or below.
- Farm Crest Personal Care housekeeping staff was re-educated by Housekeeping Supervisor 10/17/23 on PC regulation 2600.89b and the importance of reporting temperature readings outside of allowed temperature range to their direct supervisor and Director of Personal Care.
- Housekeeping staff will check water temperatures throughout the building Monday-Friday and turn in these audits to their supervisor and the Director of Personal Care weekly x8 weeks and then turn in to Director of Personal Care monthly until next inspection. Audits will be maintained in the Quality Assurance Binder until next inspection. Audits initiated 10/4/23.

If during Audits housekeeping staff discover water temperature to exceed 120 degrees, housekeeping staff will immediately notify their supervisor and Director of PC as per facility PC Water Temperature Policy. Supervisor and/or Director will then immediately place critical work order in TELS system of water temp issue and water temp will be readjusted within 8 hours of discovery to ensure compliance.

Administrative team met on 10/26/23 to review policy regarding checking hot water temperatures and updated as needed.

Completion Date: 10/31/23

Licensee's Proposed Overall Completion Date:

Implemented [redacted] 11/17/2023)

102i - Soap Dispenser

2. Requirements

2600.

102i - Soap Dispenser (continued)

102.i. A dispenser with soap shall be provided within reach of each bathroom sink. Bar soap is not permitted unless there is a separate bar clearly labeled for each resident who shares a bathroom.

**Description of Violation**

*There was an unlabeled used bar of soap in the community shower room located on the ground floor by the community room.*

**Plan of Correction**

**Accept** [redacted] - 11/06/2023)

2600.

*102.i. A dispenser with soap shall be provided within reach of each bathroom sink. Bar soap is not permitted unless there is a separate bar clearly labeled for each resident who shares a bathroom.*

*On 10/3/23 during the inspection:*

*Director of Personal Care immediately disposed of unlabeled used bar of soap found in the community shower.*

*On 10/3/23 Director of Personal Care reviewed with staff on duty which residents use that shower and it was discovered that just a few PC residents and mostly independent Suite residents use that shower.*

*Director of PC performed 3 random audits of common shower area downstairs on 10/6/23, 10/11/23, and 10/13/23 with no bars of soap of found in shower.*

*Director of Personal Care provided Staff Education at monthly staff meetings on 10/17/23, 10/18/23, and 10/19/23.*

*Director of Personal Care provided Resident Education at October's Resident Council on 10/24/23.*

*On 10/20/23 Weekly audits of downstairs common shower began and will continue for 8 weeks and then change to monthly for 6 months. If no further issues, audits will be discontinued at that point in time.*

*If noncompliance is discovered during audit period, any unlabeled bars of soap found in a common bathroom will be immediately disposed of in the trash. Director of Personal Care or designee will reeducate staff and residents on the importance of regulation 102i.*

*Completion Date: 10/31/23*

**Licensee's Proposed Overall Completion Date:**

**Implemented** [redacted] - 11/17/2023)