

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

November 9, 2023

[REDACTED], EXECUTIVE DIRECTOR  
PROVIDENCE PLACE OF LANCASTER ASSOCIATES  
[REDACTED]

RE: PROVIDENCE PLACE OF LANCASTER  
1380 ELM AVENUE  
LANCASTER, PA, 17603  
LICENSE/COC#: 33725

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/12/2023 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: PROVIDENCE PLACE OF LANCASTER License #: 33725 License Expiration: 01/14/2024  
 Address: 1380 ELM AVENUE, LANCASTER, PA 17603  
 County: LANCASTER Region: CENTRAL

**Administrator**

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

**Legal Entity**

Name: PROVIDENCE PLACE OF LANCASTER ASSOCIATES  
 Address: [REDACTED]  
 Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: I-2 Date: 09/08/2010 Issued By:

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 136 Waking Staff: 102

**Inspection Information**

Type: Partial Notice: Unannounced BHA Docket #:  
 Reason: Incident Exit Conference Date: 10/12/2023

**Inspection Dates and Department Representative**

10/12/2023 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 125 Residents Served: 101  
 Special Care Unit  
 In Home: Yes Area: Connections Capacity: 44 Residents Served: 35  
 Hospice  
 Current Residents: 5  
 Number of Residents Who:  
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 100  
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 35 Have Physical Disability: 0

**Inspections / Reviews**

10/12/2023 Partial  
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 10/29/2023

10/25/2023 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: 11/02/2023  
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 11/01/2023

Inspections / Reviews (*continued*)

## 10/27/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/02/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 11/03/2023

## 11/09/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/02/2023

Reviewer: [REDACTED]

Follow Up Type: Not Required

## 42b Abuse/Neglect

**1. Requirements**

2800.

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**

On [REDACTED] at [REDACTED], a verbal and physical altercation occurred between Residents 2 and 3. Resident 3 scratched Resident 2's hand and caused a skin tear.

On [REDACTED] at [REDACTED] Staff Member D observed Resident 5 in the bedroom of Resident 4. Resident 5 hit and knocked over items, struck a wall and knocked over a welcome sign. Staff Member D also observed Resident 5 slap Resident 4 in the face.

On [REDACTED] at [REDACTED], a verbal and physical altercation occurred between Resident 1 and Resident 2. Staff Member B heard yelling in Resident 1's bedroom and, upon entry, both Staff Members A and B observed scratches and bleeding on both residents.

**Plan of Correction**

Accept ([REDACTED] - 10/26/2023)

Immediate action taken by shift lead on [REDACTED] to contact Administrator of incident. RLAs to immediately separate residents and shift lead to assess for injury. Residents involved placed on Q30 minute checks for 24 hrs. PCP notified [REDACTED] of incidents to review any labs that need ordered or med changes. PCP to be notified day of incident ongoing. Annual Dementia training via Schoox to be completed annually by all staff by [REDACTED]. Training is monitored by BOM and is scheduled at the start of the new year for all recurring staff. New Hire staff completes upon first 40hrs of scheduled hours. Administrator provided additional training on safe management techniques on 10/24/23 and 10/26/23 for clinical staff. Administrator and DOW shifted scheduled hours 6p-6a with one additional RLA starting 10/22/2023. RLAs to ensure that doors are locked in the CN neighborhood starting 8/23/23. Key given to Resident 1 by CN Director on 10/19/23. 1:1 is to be determined on a PRN basis for residents who are showing unsafe behaviors to prevent any incidents. 1:1 to be provided by family member or 3rd party home health for awake hours of any residents deemed necessary, weekly assessment done to determine need. Determination to be made by CN Director, DOW, Administrator and VP. CN Director will ensure compliance with the previous items stated to ensure ongoing compliance with 2600.42b. CN Director or designee to monitor the unit daily by doing walking rounds in am and pm. 24hr report to be updated by shift lead during each shift to note any compliance issues. DOW, CN Director and Administrator to meet daily during the week to discuss compliance. Start date 8/23/23 and ongoing.

Licensee's Proposed Overall Completion Date: 10/25/2023

Implemented ([REDACTED] - 11/08/2023)

## 227g Support plan signatures

**2. Requirements**

2800.

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

**Description of Violation**

Resident 2's annual support plan completed [REDACTED] was signed by the accessor but was not dated in Part III: Summary and Determination Section of the support plan.

## 227g Support plan - signatures (continued)

**Plan of Correction**

Accept [REDACTED] - 10/26/2023)

Support plan was completed prior to administrator and CN director tenure at Providence Place. Support plan reviewed by administrator on 10/20/23 and signed and dated that form is complete and accurate. Administrator or designee will audit all Connections support plans starting 10/26/23 and completing by 10/31/23 to ensure all are signed and dated. Administrator or designee will audit all Connections support plans quarterly hereafter to ensure compliance. 1st quarter 3/31, 2nd quarter 6/30, 3rd quarter 9/30 and 4th quarter 12/31. CN Director will complete each Support Plan and ensure signature and date are present at time of completion. Administrator or designee will implement audits as listed above to ensure continued compliance and any errors. Will educate CN Director if any errors are found.

Licensee's Proposed Overall Completion Date: 10/31/2023

Implemented [REDACTED] - 11/07/2023)

## 231c1 Preadmit screening

**3. Requirements**

2800.

231.c.1.i. A written cognitive preadmission screening completed in collaboration with a physician or a geriatric assessment team and documented on the Department's cognitive preadmission screening form shall be completed for each resident within 72 hours prior to admission to a special care unit.

**Description of Violation**

Resident 1 was admitted to the special care unit on [REDACTED]. However, Resident 1's written cognitive preadmission screening was not completed.

Resident 5 was admitted to the special care unit on [REDACTED]. However, Resident 5's written cognitive preadmission screening does not include the date of determination.

**Plan of Correction**

Accept [REDACTED] - 10/26/2023)

Administrator/CN Director completed prescreen for Resident 1 on [REDACTED]. Administrator reviewed Resident 5's prescreen on [REDACTED] and signed that form is completed and accurate. Administrator or designee will audit all Connections prescreen documents starting 10/26/23 and completing by 10/31/23 and ensure that all are dated and complete. Administrator or designee will audit all prescreen forms quarterly hereafter to ensure compliance. 1st quarter 3/31, 2nd quarter 6/30, 3rd quarter 9/30 and 4th quarter 12/31.

Licensee's Proposed Overall Completion Date: 10/31/2023

Implemented [REDACTED] - 11/07/2023)