

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

November 21, 2023

[REDACTED], PC ADMINISTRATOR  
PRESBYTERIAN HOMES INC  
1155 INDIAN SPRINGS ROAD  
INDIANA, PA, 15701

RE: THE VILLAGE HOUSE  
1155 INDIAN SPRINGS ROAD  
INDIANA, PA, 15701  
LICENSE/COC#: 42729

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/17/2023 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 VILLAGE HOUSE **License #:** 42729 **License Expiration:** 02/05/2024  
**Address:** 1155 INDIAN SPRINGS ROAD, INDIANA, PA 15701  
**County:** INDIANA **Region:** WESTERN

**Administrator**

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

**Legal Entity**

**Name:** PRESBYTERIAN HOMES INC  
**Address:** 1155 INDIAN SPRINGS ROAD, INDIANA, PA, 15701  
**Phone:** [REDACTED] **Email:** [REDACTED]

**Certificate(s) of Occupancy**

**Type:** C 1 **Date:** 08/24/1999 **Issued By:** DOH

**Staffing Hours**

**Resident Support Staff:** 0 **Total Daily Staff:** 35 **Waking Staff:** 26

**Inspection Information**

**Type:** Full **Notice:** Unannounced **BHA Docket #:**  
**Reason:** Renewal, Incident **Exit Conference Date:** 10/17/2023

**Inspection Dates and Department Representative**

10/17/2023 **On Site:** [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 42 **Residents Served:** 32

**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:** 32  
**Diagnosed with Mental Illness:** 0 **Diagnosed with Intellectual Disability:** 0  
**Have Mobility Need:** 3 **Have Physical Disability:** 0

**Inspections / Reviews**

10/17/2023 - Full

**Lead Inspector:** [REDACTED] **Follow Up Type:** POC Submission **Follow Up Date:** 11/02/2023

Inspections / Reviews (*continued*)

## 10/27/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/08/2023

Reviewer: [REDACTED]

Follow Up Type: POC Submission

Follow Up Date: 11/03/2023

## 11/06/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/08/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 11/27/2023

## 11/21/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/08/2023

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

On [REDACTED], at approximately [REDACTED], staff member A was serving lunch during this time resident #1 repeatedly asked staff member A for a drink. Staff member A placed [REDACTED] face approximately 8 inches away from resident #1's face screaming "this is why you are always last".

Plan of Correction

Accept [REDACTED] - 11/06/2023)

Immediate action- Employee listed above was terminated upon completion of investigations of DHS and Protective services. Human resources manager [REDACTED] terminated the employee on [REDACTED]

Corrective action- All ancillary employees will be completing a Relias training on Customer Service and Elder Abuse for the month of November. Administrator held a meeting on 11/1/2023 was held to review DHS inspection. Topics discussed at meeting were an overview of the Relias trainings of Customer service and Elder Abuse. Administrator also reviewed on the procedures of how to report abuse. Attached is sign in sheet and meetings topic.

Preventative action- All ancillary staff will be doing continuing education on customer service and elder abuse yearly on Relias(November 2023). The local ombudsman will also be doing yearly trainings on Residents Rights with PCH staff. ( Last yearly training with ombudsman was June 20th, 2023, subsequently the next training will be prior to July 2024) Administrator will keep record of trainings and also, Relias trainings will be individually logged on every employees Relias account.

Licensee's Proposed Overall Completion Date: 11/02/2023

Implemented [REDACTED] - 11/21/2023)

86a - Ventilation

2. Requirements

2600.

86.a. All areas of the home that are used by the resident shall be ventilated. Ventilation includes an operable window, air conditioner, fan or mechanical ventilation that ensures airflow.

Description of Violation

The continuous air draw ventilation located in resident room #12's private bathroom was not functioning. The private bathroom did not have a window or any other means of mechanical ventilation.

The continuous air draw ventilation located in resident room #21's private bathroom was not functioning. The private bathroom did not have a window or any other means of mechanical ventilation.

Plan of Correction

Accept [REDACTED] - 11/06/2023)

Immediate Action- Immediately upon notification from DHS inspector of faulty ventilation in residents' rooms, maintenance manager [REDACTED], had [REDACTED] maintenance employees inspect those rooms ventilation in the bathrooms. They were able to have the rooms named in inspection fixed prior to DHS inspectors leaving the building.

Corrective Action- Maintenance employee [REDACTED], went around to every room and performed a test on the ventilation system in the bathrooms to ensure they were working properly. This was performed on 10/18/2023. Any faulty ventilation was immediately fixed by Maintenance. This was reviewed during DHS inspection review meeting on

86a Ventilation (continued)

11/1/2023 conducted by Administrator and discussed with PCH employees.

Preventative Action Maintenance employee [redacted] will be performing quarterly checks on bathrooms ventilation. Next check will be performed during the first quarter of 2024.

Attached is RW's first inspection of bathroom exhaust fans which was performed on 10/18/23

Licensee's Proposed Overall Completion Date: 11/02/2023

Implemented ([redacted] - 11/21/2023)

101j7 - Lighting/Operable Lamp

3. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

- 7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

Resident #2's source of bedside light was not operational. The lamp was unable to be turned on due to the light bulb being partially unscrewed from the lamp's light socket.

Plan of Correction

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

Immediate Action Immediately upon notification from DHS inspector, [redacted] (Maintenance Manager) fixed lamp and made sure the light bulb was properly secured into light fixture.

Corrective Action On 10/27/23, dayshift employee, EB, conducted an inspection of all the bedside lamps to ensure proper installation of light bulbs and that the lamp was properly working in each room. This violation was also discussed at the meeting held by the Administrator which was held on 11/1/2023 to review DHS inspection. Administrator also reviewed for staff to notify maintenance and Administrator of any lightbulb replacements or of any bedside lamps not properly working.

Preventative Action During the Quarterly fire drill performed on dayshift (7 330pm), after completion of fire drill, 1 staff member will go around and perform an inspection of lightbulbs in bedside lamps and ensure they are properly working. This was performed on 10/27/2023 and subsequently will be performed during the first quarter of 2024 by a dayshift employee after their fire drill.

Licensee's Proposed Overall Completion Date: 11/02/2023

Implemented ([redacted] - 11/21/2023)