



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to 2101 WABANK ROAD OPERATING COMPANY LLC
LEGAL ENTITY

To operate OAK LEAF MANOR PERSONAL CARE RETIREMENT HOME
NAME OF FACILITY OR AGENCY

Located at 2101 WABANK ROAD, MILLERSVILLE, PA 17551
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE/SERVICE LOCATION

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To provide Personal Care Homes
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 82
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller. (MAXIMUM CAPACITY)

Restrictions: Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 43

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from November 21, 2023 until November 21, 2024,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **338200**

Janette Biderup
ISSUING OFFICER

Juliet Marsala
ACTING DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.



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DEPARTMENT OF HUMAN SERVICES

Emailing Date: November 20, 2023

2101 Wabank Road Operating Company, LLC
173 Bridge Plaza North
Fort Lee, New Jersey 07024

RE: Oak Leaf Manor Personal Care
Retirement Home
2101 Wabank Road
Millersville, Pennsylvania 17551
Certificate #: 338200

Dear 2101 Wabank Road Operating Company, LLC:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Office of Long-term Living), licensing inspections on July 20, 2023 of the above facility, we have found that your facility is in substantial compliance with the regulations, set forth in 55 Pa. Code Ch. 2600 (relating to Personal Care Homes).

In accordance with 55 Pa.Code § 2600.11(b) (relating to procedural requirements for licensure or approval of personal care homes) a re-inspection of your newly licensed facility will be conducted within 3 months of the effective date of this license. Complete compliance with all applicable regulations is required in order to maintain your license.

Your NEW license is enclosed.

Sincerely,

A handwritten signature in black ink that reads "Juliet Marsala".

Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosures
License
Licensing Inspection Summary

Facility Information

Name: *OAK LEAF MANOR PERSONAL CARE RETIREMENT HOME* License #: *33820* License Expiration:

Address: *2101 WABANK RD , MILLERSVILLE, PA 17551*

County: *LANCASTER* Region: *CENTRAL*

Administrator

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

Legal Entity

Name: *2101 WABANK RD OPERATING COMPANY, LLC*

Address: [REDACTED]

Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: <i>1-2</i>	Date: <i>10/22/2010</i>	Issued By: <i>Millersville Borough</i>
Type: <i>1-2</i>	Date: <i>01/10/2014</i>	Issued By: <i>Millersville Borough</i>

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *82* Waking Staff: *62*

Inspection Information

Type: *Partial* Notice: *Announced* BHA Docket #: *0*

Reason: *Change Legal Entity* Exit Conference Date: *07/20/2023*

Inspection Dates and Department Representative

07/20/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: Residents Served: *53*

Secured Dementia Care Unit

In Home: *Yes* Area: *Friendship Place* Capacity: *43* Residents Served: *20*

Hospice

Current Residents: *3*

Number of Residents Who:

Receive Supplemental Security Income: <i>0</i>	Are 60 Years of Age or Older: <i>52</i>
Diagnosed with Mental Illness: <i>1</i>	Diagnosed with Intellectual Disability: <i>0</i>
Have Mobility Need: <i>29</i>	Have Physical Disability: <i>0</i>

Inspections / Reviews

07/20/2023 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *08/03/2023*

Inspections / Reviews (*continued*)

07/27/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 08/02/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 08/03/2023

08/07/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/02/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

81b - Resident Personal Equipment

1. Requirements

2600.

81.b. Wheelchairs, walkers, prosthetic devices and other apparatus used by residents must be clean, in good repair and free of hazards.

Description of Violation

On 07/20/23 in Resident Room #B13, there was an uncovered enabler bar with an opening greater than 4 ¾ inches, posing an entrapment hazard.

Plan of Correction

Accept [REDACTED] - 07/27/2023)

(Laundry Aide) covered enabler bar in B13 immediately following physical site inspection on 7/20/23. Executive Director completed an audit of all resident's rooms in the facility to ensure no other enabler bars were uncovered. Training document created by Executive Director, regarding enabler bar safety. Training document placed in employee break room, and at each nurses station. Document will be reviewed with all staff members at August staff meeting scheduled for 8/8/23 by Executive Director. Weekly audit sheet created and will be completed by Memory Care Coordinator, to ensure all enabler bars are documented, and are covered for safety. Attached are initial audit on 7/20/23, a blank audit for future use beginning 7/27/23, and the training document created for break room, nurses stations, and staff meeting on 8/8/23.

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

Implemented [REDACTED] - 08/07/2023)

82c - Locking Poisonous Materials

2. Requirements

2600.

82.c. Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

Description of Violation

A tube of Remedyl protectant Z guard paste, with a manufacture's label indicating "if swallowed call poison and control " and 2 bottles of Signet surface cleaners with a manufacture's label indicating "improper use may result in health and physical harm" were unlocked, unattended, and accessible in the hallway bathroom and kitchenette of the secured dementia care unit (SDCU). The residents in this unit have been assessed as incapable of recognizing and using poisons safely.

Plan of Correction

Accept [REDACTED] - 07/27/2023)

(Maintenance Director) removed tube of Remedy Protectant Z Guard Paste and gave it to the nurse on duty to be locked in medication room immediately during inspection on 7/20/23. 2 bottles of surface cleaner were immediately removed by Memory Care Coordinator, and placed in housekeeping closet behind a locked door following inspection on 7/20/23. Executive Director, completed an audit of all memory care rooms to ensure no further poisonous materials were present. On day of inspection 7/20/23, door to kitchenette was closed, however did not latch properly, Maintenance Director, inspected door further and noted that it did lock. After additional inspection by Executive Director, and Maintenance Director, it was observed that the kitchenette door could be pushed open with force while locked. Maintenance Director, changed hinges on door to a spring closing system and tightened all latch points on 7/26/23. Door tested by Maintenance Director, , and it is no longer able to be pushed open with force. Training

82c - Locking Poisonous Materials (continued)

PowerPoint created by Executive Director, and will be reviewed with all staff during August staff meeting scheduled for 8/8/23. Weekly Audit sheet created ensuring no poisonous materials are present and unlocked in memory care unit, and will be completed by Memory Care Coordinator beginning 7/27/23. Attached are the audit completed immediately on 7/20/23, a blank audit sheet that will begin weekly on 7/27/23, and a copy of the training PowerPoint to be shown during staff meeting on 8/8/23.

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

Implemented (█ - 08/07/2023)