

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

December 28, 2023

[REDACTED], CAMPUS ED  
THE ECUMENICAL COMMUNITIES, INC.  
[REDACTED]  
[REDACTED]

RE: ECUMENICAL RETIREMENT  
COMMUNITY OF HARRISBURG II  
601 WILHELM ROAD  
HARRISBURG, PA, 17111  
LICENSE/COC#: 36215

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/05/2023 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]  
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

**Name:** ECUMENICAL RETIREMENT COMMUNITY OF HARRISBURG II      **License #:** 36215      **License Expiration:** 09/18/2024

**Address:** 601 WILHELM ROAD, HARRISBURG, PA 17111

**County:** DAUPHIN      **Region:** CENTRAL

**Administrator**

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

**Legal Entity**

**Name:** THE ECUMENICAL COMMUNITIES, INC.

**Address:** [REDACTED]

**Phone:** [REDACTED]      **Email:** [REDACTED]

**Certificate(s) of Occupancy**

**Type:** C-2 LP      **Date:** 02/19/1997      **Issued By:** L & I

**Staffing Hours**

**Resident Support Staff:** 0      **Total Daily Staff:** 87      **Waking Staff:** 65

**Inspection Information**

**Type:** Full      **Notice:** Unannounced      **BHA Docket #:** 0

**Reason:** Renewal      **Exit Conference Date:** 12/05/2023

**Inspection Dates and Department Representative**

12/05/2023 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 104      **Residents Served:** 85

**Secured Dementia Care Unit**

**In Home:** No      **Area:**      **Capacity:**      **Residents Served:**

**Hospice**

**Current Residents:** 2

**Number of Residents Who:**

**Receive Supplemental Security Income:** 14      **Are 60 Years of Age or Older:** 85

**Diagnosed with Mental Illness:** 37      **Diagnosed with Intellectual Disability:** 0

**Have Mobility Need:** 2      **Have Physical Disability:** 0

**Inspections / Reviews**

12/05/2023 Full

**Lead Inspector:** [REDACTED]      **Follow-Up Type:** POC Submission      **Follow-Up Date:** 12/21/2023

Inspections / Reviews *(continued)*

## 12/21/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/27/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 12/08/2023

## 12/28/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/27/2023

Reviewer: [REDACTED]

Follow Up Type: Not Required

## 85a - Sanitary Conditions

## 1. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

## Description of Violation

On 12/5/23, a pungent odor of urine was detected upon entry into apartment [REDACTED]

## Plan of Correction

Accept [REDACTED] - 12/21/2023)

- Resident 1 in apartment [REDACTED] is non compliant with [REDACTED] hygiene particularly does not want to get up an night to use the bathroom. The PCA did clean this residents room on 12/5/23 as is done daily to maintain cleanliness.
- The PCA's or designee will perform spot checks 3 times a day to ensure compliance going forward to begin on 12/6/23. Spot checks will be documented daily for two weeks to establish a pattern. Documentation to be provided.
- A letter was issued to resident and POA on 12/14/23 notifying them of the need to comply with the interventions put in place to keep her semi private apartment clean and sanitary
- Ombudsman notified on 12/12/23 of violation and will be meeting with resident and AED to discuss if resident agrees with visit. Meeting scheduled for 12/21/23.
- If compliance is not followed and the room cannot be kept in a sanitary condition the resident will receive a 30-day notice.
- The unit manager or designee will ensure compliance going forward

Licensee's Proposed Overall Completion Date: 12/19/2023

Implemented [REDACTED] - 12/28/2023)

## 181c - Self-administration Assessment

## 2. Requirements

2600.

181.c. The resident's assessment shall identify if the resident is able to self-administer medications as specified in § 2600.227(e) (relating to development of the support plan). A resident who desires to self-administer medications shall be assessed by a physician, physician's assistant or certified registered nurse practitioner regarding the ability to self-administer and the need for medication reminders.

## Description of Violation

Resident 2 self-administers [REDACTED]; however, resident 2 has not been assessed by a physician, physician's assistant or certified, registered nurse practitioner regarding ability to self-administer.

Resident 3 self-administers [REDACTED] however, resident 3 has not been assessed by a physician, physician's assistant or certified, registered nurse practitioner regarding ability to self-administer and the need for reminders to take medications.

Resident 4 self-administers [REDACTED] and [REDACTED] spray; however, resident 4 has not been assessed by a physician, physician's assistant or certified, registered nurse practitioner regarding ability to self-administer and the need for reminders to take medications.

## 181c Self administration Assessment (continued)

**Plan of Correction**

Accept (█ - 12/21/2023)

- All medications found in these residents' apartments were removed on 12/5/23 during the inspection and placed in a locked cabinet in the nurse's station.
- Resident 2, Resident 3 and Resident 4 will all be assessed by a nurse for the ability to self administer medications on or before 12/31/23.
- Ongoing self administration assessments will be completed every 6 months after the initial assessment per policy.
- The DON/ADON or designee will ensure the 6 month assessments are being completed ongoing.

Licensee's Proposed Overall Completion Date: 12/19/2023

Implemented (█ - 12/28/2023)

## 183e - Storing Medications

**3. Requirements**

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

**Description of Violation**

On 12/5/23, 2 loose pills were found in the home's west medication cart.

Repeated Violation 1/25/23

**Plan of Correction**

Accept (█ - 12/21/2023)

- The two loose pills found in the cart were immediately removed and destroyed by the medication associate at the time of inspection on 12/5/23.
- Effective 12/5/23 the medication associates will continue to complete cart audits nightly as part of their job tasks.
- The medication associates were retrained on the med cart audit process during their monthly staff meeting which was held on 12/13 and/or 12/14
- Sign in sheets will be provided
- The ADON or designee will complete medication cart audits weekly to ensure compliance

Licensee's Proposed Overall Completion Date: 12/19/2023

Implemented (█ - 12/28/2023)

## 185a - Implement Storage Procedures

**4. Requirements**

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

**Description of Violation**

On █ Resident 1's medication administration record (MAR) had blood sugar reading of █. However, the reading on the resident's glucometer was █.

On █, Resident 2's MAR had a blood sugar reading of █. However, the reading on the resident's glucometer

**185a - Implement Storage Procedures (continued)**

was [REDACTED]

**Plan of Correction****Accept ( [REDACTED] - 12/21/2023)**

- Resident 1's and Resident 2's blood sugars were corrected during the inspection on 12/5/23 by the ADON. No insulin was required due to it being a fasting blood sugar.
- Bi-Weekly audits will be completed by the ADON or designee beginning on 12/11/23 for two weeks. Documentation will be provided.
- Medication Associates were re-trained by the DON/ADON on 12/13 and 12/14 during the monthly staff meeting. Sign in sheets will be provided for documentation
- Ongoing compliance will be ensured by the DON/ADON or designee

**Licensee's Proposed Overall Completion Date: 12/19/2023****Implemented ( [REDACTED] - 12/28/2023)**