

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

April 17, 2024

[REDACTED]
RENAISSANCE HOME FORKS LLC
[REDACTED]

RE: RENAISSANCE HOME FORKS
2222 SULLIVAN TRAIL
EASTON, PA, 18040
LICENSE/COC#: 22692

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/05/2024 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: *RENAISSANCE HOME FORKS* License #: *22692* License Expiration: *05/23/2024*
 Address: *2222 SULLIVAN TRAIL, EASTON, PA 18040*
 County: *NORTHAMPTON* Region: *NORTHEAST*

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: *RENAISSANCE HOME FORKS LLC*
 Address: [Redacted]
 Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *28* Waking Staff: *21*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint* Exit Conference Date: *03/05/2024*

Inspection Dates and Department Representative

03/05/2024 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *61* Residents Served: *27*

Secured Dementia Care Unit
 In Home: *No* Area: Capacity: Residents Served:

Hospice
 Current Residents: *3*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *27*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *1* Have Physical Disability: *0*

Inspections / Reviews

03/05/2024 - Partial

Lead Inspector: [Redacted] Follow-Up Type: *POC Submission* Follow-Up Date: *04/05/2024*

04/10/2024 - POC Submission

Submitted By: [Redacted] Date Submitted: *04/12/2024*
 Reviewer: [Redacted] Follow-Up Type: *Document Submission* Follow-Up Date: *04/15/2024*

Inspections / Reviews *(continued)*

04/17/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/12/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

16c - Written Incident Report

1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department’s personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On [REDACTED] Staff Member # A had written in the staff notes that Resident [REDACTED] had pushed another resident that had entered the residents room. The PCA educated the resident that no touching of other residents is allowed and then redirected the other resident for their own safety out of the room and along their way.

The home did not submit an incident report to the Department until 3/5/24.

Plan of Correction

Accept [REDACTED] - 04/10/2024)

The staff had failed to inform the administrator about the incident. The administrator reported the incident to the county office of aging as required on [REDACTED] when they were made aware. The administrator also reported the incident to the Department on the same day.

The administrator will schedule a staff meeting to educate the staff members on the mandatory reporting procedure any time there is any incident between residents that may possibly be reportable. The staff meeting is scheduled to take place on April 12th, 2024. Notifications have been sent out to the staff in regards to the training.

The Administrator will monitor for ongoing compliance [REDACTED]

Proposed Overall Completion Date: 04/12/2024

Licensee's Proposed Overall Completion Date: 04/12/2024

Implemented [REDACTED] - 04/17/2024)