

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

May 2, 2024

[REDACTED], ADMINISTRATOR
LITTLE WALKER HOLDINGS LLC
[REDACTED]

RE: TWIN CEDAR SENIOR LIVING
364 LITTLE WALKER ROAD
SHOHOLA, PA, 18458
LICENSE/COC#: 22850

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/13/2024 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: *TWIN CEDAR SENIOR LIVING* License #: *22850* License Expiration: *12/20/2024*
 Address: *364 LITTLE WALKER ROAD, SHOHOLA, PA 18458*
 County: *PIKE* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *LITTLE WALKER HOLDINGS LLC*
 Address: [REDACTED]

Certificate(s) of Occupancy

Type: *I-1* Date: *05/18/2006* Issued By: *Code Inspector*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *24* Waking Staff: *18*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal* Exit Conference Date: *03/13/2024*

Inspection Dates and Department Representative

03/13/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *37* Residents Served: *21*
 Secured Dementia Care Unit
 In Home: *No* Area: Capacity: Residents Served:
 Hospice
 Current Residents: *0*
 Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *0*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *3* Have Physical Disability: *1*

Inspections / Reviews

03/13/2024 Full
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *04/13/2024*

04/23/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *05/02/2024*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *04/30/2024*

Inspections / Reviews *(continued)*

05/02/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/02/2024

Reviewer: [REDACTED]

Follow Up Type: *Bypass Document Submission*

05/02/2024 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/02/2024

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

Resident #1 and #2 utilize a bedside mobility devices. Resident # 1's Assessment Support Plan dated [redacted] and Resident # 2's Assessment Support Plan dated [redacted] does not reflect the specific need for the device, the intended use, any risks associated with the device, the resident's ability to use the device safely for the intended purpose, identification of the specific device to be used and if a cover is required to meet FDA guidelines.

Plan of Correction

Accept ([redacted] - 05/02/2024)

All RASPS with bedside mobility devices where updated on [redacted] with the proper documentation on RASPS to support specific need, intended use, any risks associated with device and ability for resident to use safely including identification of device used and if cover is required by FDA guidelines by the Administrator. The Administrator is to ensure all RASPS are up to date and audited monthly, the first of every month, to ensure documentation is up to date and on admission.

Licensee's Proposed Overall Completion Date: 04/29/2024

Implemented ([redacted] - 05/02/2024)

103g - Storing Food

2. Requirements

2600.

103.g. Food shall be stored in closed or sealed containers.

Description of Violation

A frozen uncooked pie crust and frozen pretzel rolls were in unsealed bags located in the freezer which located outside of the home's kitchen outside door.

Plan of Correction

Accept ([redacted] - 05/02/2024)

Kitchen Director checked all food to ensure food was stored in sealed containers and closed properly on 4/14/24. The kitchen director will ensure kitchen staff signs daily check list stating food is stored sealed, start date 4/14/24. The Administrator will meet with kitchen director monthly to ensure all kitchen staff are adhering to the daily checks as well as checking that items are continually stored in sealed containers.

Licensee's Proposed Overall Completion Date: 04/30/2024

Implemented ([redacted] - 05/02/2024)

103i - Outdated Food

3. Requirements

2600.

103.i. Outdated or spoiled food or dented cans may not be used.

Description of Violation

A frozen uncooked pie crust and frozen pretzel rolls were located in the home's freezer. These items were not dated.

Plan of Correction

Accept ([redacted] - 05/02/2024)

Kitchen Director checked all food to ensure food was dated and not spoiled on 4/14/24. The kitchen director will

103i - Outdated Food (continued)

ensure kitchen staff signs daily check list ensuring all food is dated, start date 4/14/24. The Administrator will meet with kitchen director monthly to ensure all kitchen staff are adhering to the daily checks as well as checking that all items are dated and not spoiled.

Licensee's Proposed Overall Completion Date: 04/30/2024

Implemented () - 05/02/2024)

125a - Combustible Storage

4. Requirements

2600.

125.a. Combustible and flammable materials may not be located near heat sources or hot water heaters.

Description of Violation

A sock was found behind the dryer in the laundry room of the home, posing a potential fire hazard.

Plan of Correction

Accept () - 05/02/2024)

Maintenance immediately removed the sock from the back of the dryer on 03/13/2024. Maintenance to ensure housekeeping staff check behind dryer for any combustible and or flammable materials daily. Housekeeping to sign off daily on laundry room checklist sheet which was implemented on 4/14/24. Maintenance to oversee housekeeping completes daily with monthly audits.

Licensee's Proposed Overall Completion Date: 04/30/2024

Implemented () 05/02/2024)