

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

May 20, 2024

[REDACTED]
PRODIGY SPECTRUM MANAGEMENT PLUS
[REDACTED]

RE: PRODIGY SPECTRUM
MANAGEMENT PLUS
626 W. MARKET STREET
YORK, PA, 17401
LICENSE/COC#: 33969

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/06/2024 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: *PRODIGY SPECTRUM MANAGEMENT PLUS* License #: 33969 License Expiration:

Address: *626 W. MARKET STREET , YORK, PA 17401*

County: *YORK* Region: *CENTRAL*

Administrator

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

Legal Entity

Name: *PRODIGY SPECTRUM MANAGEMENT PLUS*

Address: [REDACTED]

Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *R-4* Date: *02/12/2024* Issued By: *City of York*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *3* Waking Staff: *2*

Inspection Information

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

Reason: *New* Exit Conference Date: *05/06/2024*

Inspection Dates and Department Representative

05/06/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: Residents Served: *3*

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: *3*

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

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

Inspections / Reviews

05/06/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/20/2024*

05/13/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: *05/16/2024*

Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/20/2024*

Inspections / Reviews *(continued)*

05/15/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/16/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 06/03/2024

05/20/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/16/2024

Reviewer: [REDACTED]

Follow-Up Type: Not Required

96a - First Aid Kit

1. Requirements

2600.

96.a. The home shall have a first aid kit that includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers.

Description of Violation

The first aid kit in the administrator's office does not include scissors, tweezers, CPR breathing shield and eye coverings.

Plan of Correction

Directed [redacted] - 05/15/2024)

On 5/6/2024 the state inspector informed and educated the home's administrator and director of the missing tools in our first aid kit. To fix the missing tools from our first aid kit our administrator ordered a new first aid kit on 5/6/2024. The new first aid kit arrived 5/09/2024 and includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers which has been verified by the administrator. To ensure there are no missing tools again the first aid kits will be checked and restocked if needed on a monthly basis by the administrator and this will begin 6/1/2024 and continue every first of the month.

Proposed Overall Completion Date: 05/13/2024

[Directed]

In addition to the steps above, the home will complete the following:

- Administrator or designee will education all staff on this violation, including notifying administrator or director when items need restocked between the monthly checks. Staff will be educated by 5/31/2024. Documentation of the education should be kept and available for review by the Department.

Directed Completion Date: 05/31/2024

Implemented [redacted] - 05/17/2024)

101j6 - Mirror

2. Requirements

2600.

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

- 6. A mirror.

Description of Violation

There is no mirror in resident bedroom [redacted] and [redacted]

Plan of Correction

Directed [redacted] - 05/15/2024)

On 5/6/2024 inspector informed and educated the home's administrator and director that mirrors need to be in each resident's room. The administrator purchased mirrors for each individual in each room and the mirrors were installed 5/10/2024 by the administrator and administrator's assistant. To ensure this does not happen again each room's mirror is mounted onto the wall and mirror condition will be added to our weekly room checklist to verify mirrors are still in place and in good condition. The administrator is responsible for the items on the weekly room checklist; the mirrors were added to the checklist on 5/13/2024. Each employee completing the room check will be made aware of the addition to the checklist and be responsible to check the mirrors each week during room checks. Room checks will begin 5/16/2024 and continue every Thursday on a weekly basis.

101j6 - Mirror (continued)

Proposed Overall Completion Date: 05/13/2024

[Directed]

In addition to the steps above, the home will complete the following:

- Administrator or designee will education all staff on this violation and the addition to the checklist. Staff will be educated by 5/31/2024. Documentation of the education should be kept and available for review by the Department.

Directed Completion Date: 05/31/2024

Implemented [redacted] - 05/17/2024)

105g - Lint Removal and Duct Cleaning

3. Requirements

2600.

105.g. To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

Description of Violation

On 5/6/24, there was an approximate 2 inch accumulation of lint in the lint trap of the home's dryer. There were no clothes in the dryer at the time.

Plan of Correction

Accepted [redacted] - 05/15/2024)

The administrator immediately cleaned the lint trap and drum and then hung a sign that states "NOTICE Please empty lint trap from dryer and drum after each use" on 5/6/2024. In addition to hanging the sign the administrator showed each employee how to properly clean and dispose of lint from the lint trap and drum. This was completed on 5/10/2024. Beginning 5/13/2024, to prevent this from happening again each staff member on duty will check the dryer after prior to each load of clothes being out in the dryer, after each load being taken out of the dryer and at the completion of their shifts daily. In addition beginning 5/17/2024, the administrator's assistant will check the dryer lint trap to ensure it is being emptied properly.

Licensee's Proposed Overall Completion Date: 05/13/2024

Implemented [redacted] - 05/17/2024)

124 - Notice to Fire Department

4. Requirements

2600.

124. The home shall notify the local fire department in writing of the address of the home, location of the bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.

Description of Violation

The home does not have documentation of written notification to the local fire department of the address of the home, location of the bedrooms, and the assistance needed to evacuate in an emergency.

Plan of Correction

Accepted [redacted] - 05/15/2024)

The administrator immediately wrote a letter including the address of home, location of bedrooms, and assistance

124 - Notice to Fire Department (continued)

needed for residents to evacuate the home in case of an emergency. The administrator then directly delivered the letter to Chief Collins at the York City Fire Department on 5/7/2024. Starting 5/13/2024 to prevent this in the future, a copy of the letter will be kept on file readily available by the administrator. If any changes occur the document will be updated, and a new copy will be placed on file as well as notifying the Fire Department of these changes immediately, this will go into effect 5/13/2024. Beginning 5/13/2024 the administrator will review this letter quarterly to ensure all information is correct and current. If not, the administrator will immediately complete and send in an updated letter to the Fire Department and the new copy will be kept on file for review.

Licensee's Proposed Overall Completion Date: 05/13/2024

Implemented [redacted] - 05/17/2024)

126a - Furnace Inspection

5. Requirements

2600.

126.a. A professional furnace cleaning company or trained maintenance staff person shall inspect furnaces at least annually. Documentation of the inspection shall be kept.

Description of Violation

Documentation of the last inspection of the home's furnace was not provided.

Plan of Correction

Accept [redacted] 05/15/2024)

On 5/6/2024 the state inspector instructed and educated the home's administrator and director on the furnace system needing an inspection and cleaning annually and educated us on what documentation would be needed. The administrator contacted several local professional furnace cleaning companies on 5/6/2024 to schedule inspections for the furnace units. The administrator approved F.W Behler Inc. to come out to inspect the units, provide maintenance and complete needed repairs, in which all have been completed on 5/9/2024. To prevent this from happening in the future all units in the facility will be cleaned and maintained annually by a professional furnace cleaning company. Starting 4/9/2025 the administrator will contact a professional furnace cleaning company within thirty days of when annual inspection/cleaning is due to schedule an annual inspection and keep all inspection documentation readily available on file for review. Starting 5/13/2024 the administrator will keep dates of inspection and a notice of when to call the furnace cleaning company on the calendar.

Proposed Overall Completion Date: 05/13/2024

Licensee's Proposed Overall Completion Date: 05/13/2024

Implemented [redacted] - 05/17/2024)

126b - Furnace Cleaning

6. Requirements

2600.

126.b. Furnaces shall be cleaned according to the manufacturer's instructions. Documentation of the cleaning shall be kept.

Description of Violation

Documentation of when the home's furnace was last cleaned was not provided.

126b - Furnace Cleaning (continued)

Plan of Correction

Accepted [REDACTED] - 05/15/2024)

On 5/6/2024 the state inspector came out, informed and educated the home's administrator and director on the furnace cleaning and what documentation is needed for the furnace cleaning. The administrator immediately called several local professional furnace cleaning companies on 5/6/2024 to schedule cleaning and maintenance for the furnace units. F.W. Behler Inc. came out on 5/9/2024 cleaned and provided needed maintenance on the furnace units. Starting 5/13/2024, the administrator will contact a professional furnace cleaning company to come out and clean the furnace units annually and keep all cleaning and maintenance documentation readily available on file for review. To ensure the cleaning stays up to date starting 4/9/2025 the administrator will contact a professional furnace cleaning company within thirty days of when annual cleaning is due and schedule cleaning. Also starting 5/13/2024 the administrator will keep dates of cleaning and a notice of when to call the furnace cleaning company on the calendar.

Proposed Overall Completion Date: 05/13/2024

Licensee's Proposed Overall Completion Date: 05/13/2024

Implemented [REDACTED] - 05/17/2024)

132a - Monthly Fire Drill

7. Requirements

2600.

132.a. An unannounced fire drill shall be held at least once a month.

Description of Violation

An unannounced fire drill was not held during the month of April 2024.

Plan of Correction

Directed [REDACTED] - 05/15/2024)

The state inspector educated home's administrator and director on monthly fire drills and that a log must be kept. The administrator immediately scheduled a time for an unannounced fire drill to occur on 5/8/2024 with the City of York's Fire Chief. The administrator will conduct an unannounced fire drill monthly including an overnight drill. Effective 5/13/2024 the administrator will schedule fire drills and keep a monthly log using a state required PA Fire Drill Record - 55 PA. Code 26. 132(c) Form to keep record and monthly check on this form will be conducted by the administrator and administrator's assistant every 15th of each month moving forward. Starting 5/13/2024 the administrator will be responsible for scheduling the monthly fire drills one month prior to fire drill occurring; this schedule will be kept on the administrator's personal calendar and in our fire drill log.

Proposed Overall Completion Date: 05/13/2024

[Directed]

In addition to the steps above, the home will complete the following:

- On 5/6/2024, the state inspector educated home's administrator and director on monthly fire drills and that a log must be kept.
- Administrator or designee will education all staff on this violation. Staff will be educated by 5/31/2024. Documentation of the education should be kept and available for review by the Department.

Directed Completion Date: 05/31/2024

132a - Monthly Fire Drill (continued)

Implemented [redacted] - 05/17/2024)

132b - Safety Inspection/Fire Drill

8. Requirements

2600.

132.b. A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.

Description of Violation

The home has not conducted a fire safety inspection and drill by a fire safety expert.

Plan of Correction

Accept [redacted] - 05/15/2024)

On 5/6/2024, The state inspector educated home's administrator and director on an annual fire drill with a safety expert and the needed documentation. The administrator immediately on 5/6/2024 reached out to the City of York Fire Department to schedule a fire drill with the Chief. On 5/8/2024 a fire safety inspection and fire drill was conducted by Chief Collins from the City of York Fire Department with documentation provided to us by Chief Collins on 5/8/2024 and has been filed. Effective 5/13/2024, this documentation will be kept on file readily available by the administrator who is responsible for obtaining and maintaining it. To prevent this from happening in the future the administrator will reach out thirty days prior to the fire inspection due date of 5/8/2025 to schedule a fire drill with the City of York Fire Department.

Proposed Overall Completion Date: 05/13/2024

Licensee's Proposed Overall Completion Date: 05/13/2024

Implemented [redacted] - 05/17/2024)

132d - Evacuation

9. Requirements

2600.

132.d. Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert. For purposes of this subsection, the fire safety expert may not be a staff person of the home.

Description of Violation

The home does not have a maximum safe evacuation time and designated fire safe area specified in writing by a fire safety expert.

Plan of Correction

Directed [redacted] - 05/15/2024)

On 5/8/2024 all residents were evacuated from the entire building in one minute and thirty-eight seconds during a supervised fire drill conducted by Chief Collins of the City of York fire Department (a fire safety expert). The administrator is responsible for obtaining documentation, which was received and filed on 5/8/2024. All residents were safely evacuated to the rear parking lot located a safe distance away from the facility. All residents and staff were safely evacuated and accounted for in the location of our fire safe specified area before two minutes and thirty seconds, the maximum safe evacuation time allowed. Effective 5/13/2024 the administrator will keep a monthly log of the time and designated fire safe area with our monthly fire drill log. Starting 5/13/2024 and then moving

132d - Evacuation (continued)

forward the 15th of each month the administrator will review this log.

Proposed Overall Completion Date: 05/13/2024

[Directed]

In addition to the steps above, the home will complete the following:

- Administrator or designee will education all staff on this violation, including the home's evacuation time. Staff will be educated by 5/31/2024. Documentation of the education should be kept and available for review by the Department.*

Directed Completion Date: 05/31/2024

Implemented [REDACTED] - 05/17/2024)