

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

October 21, 2024

[REDACTED], VP OF OPERATIONS
HOMEWOOD AT SPRING HOUSE ESTATES INC
[REDACTED]

RE: VICTORIA HOUSE AT SPRING
HOUSE ESTATES
150 VICTORIA AVENUE
EVERETT, PA, 15537
LICENSE/COC#: 33510

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/17/2024 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: VICTORIA HOUSE AT SPRING HOUSE ESTATES **License #:** 33510 **License Expiration:** 09/19/2025
Address: 150 VICTORIA AVENUE, EVERETT, PA 15537
County: BEDFORD **Region:** CENTRAL

Administrator

Name: [REDACTED]

Legal Entity

Name: HOMEWOOD AT SPRING HOUSE ESTATES INC
Address: [REDACTED]

Certificate(s) of Occupancy

Type: Other **Date:** 09/14/2009 **Issued By:** Commonwealth Code Inspection Bedford County

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 39 **Waking Staff:** 29

Inspection Information

Type: Full **Notice:** Unannounced **BHA Docket #:**
Reason: Renewal **Exit Conference Date:** 09/17/2024

Inspection Dates and Department Representative

09/17/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 52 **Residents Served:** 26

Secured Dementia Care Unit

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

Hospice

Current Residents: 4

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 26
Diagnosed with Mental Illness: 1 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 13 **Have Physical Disability:** 0

Inspections / Reviews

09/17/2024 Full

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 10/04/2024

10/04/2024 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 10/11/2024
Reviewer: [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 10/14/2024

Inspections / Reviews *(continued)*

10/21/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/11/2024

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

132h - Designated Meeting Place

2. Requirements

2600.

132.h. Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

Description of Violation

The fire drill record for the drill conducted on [REDACTED] indicates 16 residents in the home at the time of the alarm, with an evacuation of only 12 residents. The record does not include any problems or planned corrective action.

Plan of Correction

Accept ([REDACTED] - 10/04/2024)

All departments were educated via Administrator on necessity of vacating all residents from the area during a fire drill to a fire safe area, regulation 2600.132.h. COMPLETE

Maintenance Director, [REDACTED] was also trained by Administrator on importance of completing fire drill log correctly each month and encouraged to hold an additional drill as a correction (if needed) the following day. This education occurred on 9/30/24. COMPLETE

Administrator and Maintenance Director will review all fire drills following monthly drills to ensure adequate documentation in the fire drill log for 6 months to ensure adequate completion. Both will audit drills and sign off on each drill monthly. This will be complete in March 2025

See attached attendance sheets from training and 6 month audit form.

Licensee's Proposed Overall Completion Date: 10/01/2024

Implemented ([REDACTED] - 10/21/2024)

141b1 - Annual Medical Evaluation

3. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident #1's most recent medical evaluation was completed on [REDACTED]. The resident's previous medical evaluation was completed on [REDACTED]

Plan of Correction

Accept ([REDACTED] - 10/04/2024)

Administrator and Resident Services Director received training from DHS Surveyor on 9/17/24 on regulation 141.b.1.

Resident Services Director will manage all Medical Evaluations to ensure all residents receive an annual medical evaluation in a timely manner according to 141.b.1. All resident records will be reviewed monthly for 6 months by the Resident Services Director to ensure all Medical Evaluations are correct and complete.

Training is COMPLETE

See attached 6 month audit tracking form.

Licensee's Proposed Overall Completion Date: 10/01/2024

Implemented ([REDACTED] - 10/21/2024)