

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

November 19, 2024

[REDACTED]  
EMMANUEL HOME  
[REDACTED]

RE: EMMANUEL HOME  
800 PRIESTLY AVENUE  
NORTHUMBERLAND, PA, 17857  
LICENSE/COC#: 20053

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/31/2024 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: EMMANUEL HOME License #: 20053 License Expiration: 05/25/2025  
 Address: 800 PRIESTLY AVENUE, NORTHUMBERLAND, PA 17857  
 County: NORTHUMBERLAND Region: NORTHEAST

**Administrator**

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

**Legal Entity**

Name: EMMANUEL HOME  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: C-2 LP Date: 06/28/1999 Issued By: L&I

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 38 Waking Staff: 29

**Inspection Information**

Type: Partial Notice: Unannounced BHA Docket #:  
 Reason: Complaint Exit Conference Date: 10/31/2024

**Inspection Dates and Department Representative**

10/31/2024 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 38 Residents Served: 26  
 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: 26  
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 12 Have Physical Disability: 0

**Inspections / Reviews**

10/31/2024 Partial  
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 11/23/2024

11/19/2024 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: 11/19/2024  
 Reviewer: [REDACTED] Follow-Up Type: Bypass Document Submission

Inspections / Reviews *(continued)*

11/19/2024 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/19/2024

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

132g - Fire Drills Days/Times

1. Requirements

2600.

132.g. Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

Description of Violation

The home's fire drill logs indicate a sleeping hour drill was conducted on 9/20/24 at 1:30am with three staff present in the home to evacuate residents. The fire drill logs indicate staff person A participated in the fire drill. Staff person A is the home's director of nursing and is not scheduled to work during the 3rd shift hours of 11pm to 7am. The administrator of the home indicated that staff person A came in to participate in the fire drill. The home routinely schedules only 2 staff persons on 3rd shift. The homes previous sleeping hour drill was conducted on 3/27/24 at 5:37am and the fire drill log indicates that 4 staff persons participated in that drill. The home did not conduct a sleeping hour drill with only the 2 staff persons regularly scheduled on 3rd shift in the past year.

Plan of Correction

Accept ( [redacted] - 11/19/2024)

The Administrator, [redacted] is responsible to fix the problem. In order to be in compliance with PA Code 2600.132.g. a corrected fire drill was held on 11/18/2024 during the sleeping hour of 4:55 AM. The drill was conducted during third shift which is from 11pm to 7am. The corrected fire drill was conducted with ONLY 2 staff persons who are regularly scheduled on the home's 3rd shift. "Staff Person A" the Director of Nursing (DON) [redacted] DID NOT participate in the corrected fire drill. Going forward when planning fire drills the Administrator, [redacted] and the home will consider what human resources will be available in the event of a real fire at any given time, while keeping in mind the requirements of the home's evacuation plan. Also going forward the Administrator, [redacted] will ensure that additional staff such as "Staff Person A" will not be used to accomplish a successful evacuation. The use of additional staff creates an incorrect fire drill. To further correct, the Administrator, [redacted] has relayed to "Staff Member A" and facility staff that the home MAY NOT practice evacuating residents using additional staff and resources that won't be available in a real fire.

Licensee's Proposed Overall Completion Date: 11/18/2024

Implemented ( [redacted] - 11/19/2024)

227d - Support Plan Medical/Dental

2. Requirements

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

Resident [redacted] requires assistance of two persons for safe transfers and uses a wheel chair for mobility. The support plan dated [redacted] was not updated to reflect this need and did not include a plan to address this need.

Plan of Correction

Accept ( [redacted] - 11/19/2024)

The Director of Nursing (DON), [redacted] is responsible to fix problem to be in compliance with PA Code 2600.227.d and ensure that all future Resident Assessment and Support Plans (RASP) are completed thoroughly and updated to include whether the resident requires the assistance of two persons for safe transfers, and if the resident uses a wheelchair for mobility. The Director of Nursing (DON) has corrected this problem by completing and

227d Support Plan Medical/Dental (continued)

updating "Resident [REDACTED]", Resident Assessment and Support Plans (RASP) on October 31, 2024. Part II of the Assessment and Support Plan Information now indicates that severe back pain restricts "Resident [REDACTED]" from ambulating independently at times and getting OOB (Out of Bed) assist x1 2 OOB (Out of Bed) in the morning. Wheelchair available for transport. The appendix of "Resident [REDACTED]" Resident Assessment and Support Plan (RASP) also now indicates that "Resident [REDACTED]" requires assistance to move from one place to another, capable of walking independently, but severe pain limits "Resident [REDACTED]" ability at times, wheelchair available for use. Moving forward, The Director of Nursing (DON), [REDACTED] will review and update all Resident Assessment and Support Plans (RASP) more thoroughly to ensure that all Resident Assessment and Support Plans (RASP) are updated timely. The Administrator, [REDACTED] will also make periodic reviews of all Resident Assessment and Support Plans (RASP) moving forward.

Licensee's Proposed Overall Completion Date: 11/14/2024

Implemented ([REDACTED] - 11/19/2024)