

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

April 30, 2025

[REDACTED]
FAITH FRIENDSHIP MINISTRIES INC
[REDACTED]

RE: FAITH FRIENDSHIP VILLA OF
MOUNTVILLE
128 WEST MAIN STREET
MOUNTVILLE, PA, 17554
LICENSE/COC#: 32202

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/19/2025 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: FAITH FRIENDSHIP VILLA OF MOUNTVILLE License #: 32202 License Expiration: 04/24/2025
 Address: 128 WEST MAIN STREET, MOUNTVILLE, PA 17554
 County: LANCASTER Region: CENTRAL

Administrator

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

Legal Entity

Name: FAITH FRIENDSHIP MINISTRIES INC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 01/22/1986 Issued By: Labor & Industry
 Type: C-2 LP Date: 09/10/2015 Issued By: Labor & Industry

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 62 Waking Staff: 47

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #: 0
 Reason: Complaint, Incident Exit Conference Date: 03/19/2025

Inspection Dates and Department Representative

03/19/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 74 Residents Served: 62

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

Hospice
 Current Residents: 0

Number of Residents Who:
 Receive Supplemental Security Income: 51 Are 60 Years of Age or Older: 40
 Diagnosed with Mental Illness: 49 Diagnosed with Intellectual Disability: 16
 Have Mobility Need: 0 Have Physical Disability: 2

Inspections / Reviews

03/19/2025 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 04/04/2025

04/02/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 04/30/2025
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 04/09/2025

Inspections / Reviews *(continued)*

04/07/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/30/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 04/30/2025

04/30/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/30/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

Resident [REDACTED] has a history of physical and verbal aggression in the home which has resulted in the other residents being fearful of Resident [REDACTED] presence in the home. The following incidents are examples of Resident [REDACTED]'s physical and verbal aggression:

- On [REDACTED], Resident [REDACTED] cursed at staff and other residents.
- On [REDACTED], Resident [REDACTED] cursed at another resident.
- On [REDACTED], it was reported to staff by another resident in the home that Resident [REDACTED] was always starting fights, and nothing was being done about it.
- On [REDACTED] at approximately 4:30 PM, Resident [REDACTED] was yelling and screaming "you all are going to [REDACTED]" to everyone in the home's dining room.
- On [REDACTED], at approximately 3:20 PM, Resident [REDACTED] punched Resident [REDACTED] in the face. As a result of the incident, Resident [REDACTED] sustained some redness to [REDACTED] left cheek. Resident [REDACTED] was also observed yelling and screaming, threatening to harm staff and threatening to burn the home down. As a result of the physical incident with Resident [REDACTED] and making threats, Resident [REDACTED] was arrested.

Repeated Violation - [REDACTED], et al

Plan of Correction

Directed [REDACTED] - 04/07/2025)

Administrator will continue to talk and train staff on the importance of incident and abuse reporting including neglect, intimidation, physical or verbal abuse and mistreatment of any resident at any time by staff or another resident.

Managers and administrator will investigate any claims with residents and staff and write necessary reports in a timely manner as per BHS and APS guidelines. Administrator will monitor all such claims and reports.

Administrator and Care managers will continue with discussions during staff meetings and trainings that includes attitudes and behaviors, especially residents that may be acting out in aggressive and threatening manners. Staff will receive annual training via Care academy online as well as in-house by the Administrator and/or Care managers. See attachments.

On 1/3/25 the Care manager spoke to Resident [REDACTED] about [REDACTED] behavior telling [REDACTED] that [REDACTED] does not have the right to cuss people out because [REDACTED] is upset.

On 2/10/25 DC staff attempted to discuss Resident [REDACTED]'s behavior with [REDACTED] but [REDACTED] had already left the building and grounds.

On 2/19/25 DC staff asked Resident [REDACTED] to leave the dining room.

On 2/28/25 a Care manager contacted police requesting a 302. However, [REDACTED] was arrested and taken to the

42b Abuse (continued)

Lancaster County Prison.

On 3/12/25 staff were educated on the importance of incident and abuse reporting, neglect, intimidation, physical or verbal abuse and mistreatment of any resident at any time by staff or another resident by the Administrator and Care Manager.

On 3/4/25 the Administrator interviewed Resident [REDACTED] discussing the incident on [REDACTED] assuring [REDACTED] that [REDACTED] is safe here at the home. Beginning 5/14/25 Care Managers will begin conducting monthly face to face interviews with residents to provide on going monitoring to ensure residents feel safe.

Proposed Overall Completion Date: 04/09/2025

[Directed]

- Beginning no later than 4/25/25, care managers will begin conducting monthly face to face interviews with no less than a 5% sample size of residents to provide on going monitoring to ensure residents feel safe. Documentation of these interviews will be kept and available for review by the Department.

Directed Completion Date: 04/25/2025

Implemented ([REDACTED] - 04/30/2025)