

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

May 30, 2025

[REDACTED], CEO
SPIRITRUST LUTHERAN

RE: SPIRITRUST LUTHERAN THE
VILLAGE AT GETTYSBURG
1075 OLD HARRISBURG ROAD
GETTYSBURG, PA, 17325
LICENSE/COC#: 34442

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/08/2025 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: SPIRITRUST LUTHERAN THE VILLAGE AT GETTYSBURG License #: 34442 License Expiration: 09/19/2025
 Address: 1075 OLD HARRISBURG ROAD, GETTYSBURG, PA 17325
 County: ADAMS Region: CENTRAL

Administrator

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

Legal Entity

Name: SPIRITRUST LUTHERAN
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-1 Date: 11/10/2010 Issued By: Department of Labor & Industry
 Type: C-1 Date: 11/10/1987 Issued By: Department of Health

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 14 Waking Staff: 11

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
 Reason: Renewal Exit Conference Date: 05/08/2025

Inspection Dates and Department Representative

05/08/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 20 Residents Served: 14

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: 14
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

05/08/2025 - Full

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 05/23/2025

Inspections / Reviews (*continued*)

05/14/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/28/2025

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 05/20/2025

05/15/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/28/2025

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 06/02/2025

05/30/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/28/2025

Reviewer: [REDACTED]

Follow-Up Type: Not Required

225c - Additional Assessment

1. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

- 2. If the condition of the resident significantly changes prior to the annual assessment.

Description of Violation

Resident #2's most recent assessment, dated [REDACTED], indicated A – independent for ambulation. However, the resident utilizes a walker, has had documented falls in the home, experiences gait inconsistency and receives PT services for muscle weakness. The resident's assessment has not been updated to reflect these changes.

Plan of Correction

Accept ([REDACTED]) - 05/15/2025)

Resident #2 assessment and support plan was updated by the Personal Care Home Administrator on 5/8/2025. An audit of the Assessment and Support Plans for all residents will be completed by the Personal Cre Home Administrator by 6/1/2025 To ensure ongoing compliance audits of all resident assessments and support plans will be completed by the Personal Care Home Administrator monthly starting June 1,2025 for a period of 3 months. The Personal Care Administrator will educate the Personal Care Staff on properly completing and updating assessments and support plans. Will meet with each staff member prior to June 1,2025 and will have the staff person sign off on the education. Will be reviewed again in the June 2025 staff meeting

Licensee's Proposed Overall Completion Date: 06/01/2025

Implemented ([REDACTED]) - 05/30/2025)

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 #1 utilizes a bedside mobility device. The resident's most recent support plan, dated 4/9/2025, did not reflect the intended use, nor identification of the specific device to be used and whether a cover is required per FDA guidelines.

Resident #2 utilizes a walker to ambulate. The resident's most recent support plan, dated 4/24/2025, did not include the use of a walker.

Plan of Correction

Accept ([REDACTED]) - 05/15/2025)

Resident #1 assessment and support plan was updated by the Personal Care Home Administrator on 5/9/2025 There are no other bed mobility devices being used currently in this PC We continue to monitor this resident for appropriate use of this device

Resident #2 Assessment and support plan was updated by the Personal Care Home Administrator on 5/8/2025. An audit of the assessment and support plan for all residents will be completed by the Personal Care Home Administrator by June 1,2025. To ensure ongoing compliance audits of all resident assessments and support plans will be completed by the Personal Care Home Administrator monthly starting June 1,2025 for a period of 3 months The Personal Care Administrator will educate the Personal Care Staff on properly completing and updating

227d - Support Plan Medical/Dental (continued)

assessments and support plans. Will meet with each staff member prior to June 1,2025 and will be reviewed at staff meeting in June Will have the staff sign off on the education

Licensee's Proposed Overall Completion Date: 06/01/2025

Implemented (█ - 05/30/2025)

253c - Records Log

3. Requirements

2600.

253.c. The home shall keep a log of resident records destroyed on or after October 24, 2005. This log must include the resident's name, record number, birth date, admission date and discharge date.

Description of Violation

Resident #3, #4, and #5's records were destroyed on 4/1/2025; however, records of the destruction did not include the residents' record numbers or birth dates.

Plan of Correction

Accept (█ - 05/15/2025)

Resident #3,#4 and #5 The Personal Care Home Administrator provided the information that was missing during the inspection, which were Record number and date of birth. Personal Care Administrator updated the Document Storage/Destruction Log to add date of birth Personal Care Home Administrator will ensure that Medical Records has the correct form to use moving forward and that all information is filled in. There will not be any further records destroyed in 2025. PCHA will review form in 2026 when records are destroyed. Personal Care Home Administrator updated the old log with the missing information during the inspection on 5/8/2025. New form was created on 5/14/2025 and shared with Medical Records. The Personal Care Home Administrator met with the Medical Record staff member (there is only one) on 5/14/2025 and educated on the regulation and what needs completed moving forward. New form replaced the old one and will be utilized moving forward. The Personal Care Home Administrator will review the Destruction form when charts are destroyed yearly

Licensee's Proposed Overall Completion Date: 05/14/2025

Implemented (█ - 05/30/2025)