

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

July 31, 2025

[REDACTED], ADMINISTRATOR
WEAVERLAND MENNONITE HOMES
1307 APPLE STREET
EPHRATA, PA, 17522

RE: LINCOLN CHRISTIAN HOME
1307 APPLE STREET
EPHRATA, PA, 17522
LICENSE/COC#: 32938

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/25/2025, 06/26/2025 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: *LINCOLN CHRISTIAN HOME* License #: *32938* License Expiration: *03/13/2026*
 Address: *1307 APPLE STREET, EPHRATA, PA 17522*
 County: *LANCASTER* Region: *CENTRAL*

Administrator

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

Legal Entity

Name: *WEAVERLAND MENNONITE HOMES*
 Address: *1307 APPLE STREET, EPHRATA, PA, 17522*
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: <i>I-2</i>	Date: <i>09/06/2014</i>	Issued By: <i>Borough of Ephrata</i>
Type: <i>I-2</i>	Date: <i>07/06/2020</i>	Issued By: <i>Borough of Ephrata</i>
Type: <i>Other</i>	Date: <i>07/06/2020</i>	Issued By: <i>Borough of Ephrata</i>

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *92* Waking Staff: *69*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal* Exit Conference Date: *06/26/2025*

Inspection Dates and Department Representative

06/25/2025 - On-Site: [REDACTED]
 06/26/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *93* Residents Served: *66*

Secured Dementia Care Unit

In Home: *Yes* Area: *memory care* Capacity: *30* Residents Served: *18*

Hospice

Current Residents: *3*

Number of Residents Who:

Receive Supplemental Security Income: <i>0</i>	Are 60 Years of Age or Older: <i>66</i>
Diagnosed with Mental Illness: <i>0</i>	Diagnosed with Intellectual Disability: <i>1</i>
Have Mobility Need: <i>26</i>	Have Physical Disability: <i>1</i>

Inspections / Reviews

06/25/2025 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *07/12/2025*

07/17/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 07/30/2025

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 07/24/2025

07/31/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 07/30/2025

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

16c - Written Incident Report

1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On 5/9/25, Resident 1 received 2 drops of prescribed Tobramycin eye drops in the left eye instead of the right eye for which it is prescribed. The home did not report this incident to the Department until 5/12/25.

Plan of Correction

Accept (█) - 07/17/2025

In response to the violation on 06/25/2025 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 05/09/2025 by the Caregiver to Monitor the resident for adverse effects and notify the resident, POA, and Doctor.

To enhance the currently compliant operations, on 07/04/2025 the Administrator will educate the caregivers on their duty to notify administration upon discovery of a medication error so that the appropriate form can be faxed to DHS, with a completion date of 07/09/2025.

Effective 06/30/2025 the Caregiver will perform upon every discovery a Checklist through 12/01/2025 to maintain ongoing compliance with reporting an incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department, and to follow the guidelines in § 2600.15 (relating to abuse reporting covered by law). Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 07/09/2025

Implemented (█) - 07/31/2025

51 - Criminal Background Check

2. Requirements

2600.

51. Criminal History Checks - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Description of Violation

Staff person A's background check document was not available on the PA State Police Request for Criminal Record Check form (SP4-164), or via the e-patch system.

Plan of Correction

Accept (█) - 07/17/2025

In response to the violation on 06/25/2025 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 06/25/2025 by the Administrator to complete a background check.

To enhance the currently compliant operations, on 07/03/2025 the Administrator will Audit all employee files to ensure compliance with background checks, with a completion date of 07/09/2025.

51 - Criminal Background Check (continued)

Effective 07/01/2025 the Administrator will perform upon each new hire a checklist through 12/01/2025 to maintain ongoing compliance with having criminal history checks and hiring policies that are in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults). Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 07/09/2025

Implemented (█) - 07/31/2025)

132b - Safety Inspection/Fire Drill

3. 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 last fire safety inspection and fire drill observed by a fire safety expert was conducted on 3/27/25. The previous inspection and drill was conducted on 2/22/24.

Plan of Correction

Accept (█) - 07/17/2025)

In response to the violation on 06/25/2025 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 07/09/2025 by the Administrator to None required.

To enhance the currently compliant operations, on 07/09/2025 the Administrator will be educated by DHS inspectors upon annual facility inspection and evidenced by licensing inspection summary, with a completion date of 07/09/2025.

Effective 07/09/2025 the Administrator will perform annually schedule inspection within 365 days through 02/28/2026 to maintain ongoing compliance with ensuring a fire safety inspection and fire drill conducted by a fire safety expert is completed annually, and to keep documentation of each fire drill and fire safety inspection. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 07/09/2025

Implemented (█) - 07/31/2025)

187d - Follow Prescriber's Orders

4. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident 1 is prescribed Tobramycin eye drops – 2 drops in right eye at hour of sleep. On 5/9/25, 2 drops were administered in the left eye.

187d - Follow Prescriber's Orders (continued)

Resident 2 is prescribed Prednisolone Eyedrop to left eye BID. On 5/14/25, the morning dose of this medication was administered in both eyes.

Plan of Correction**Accepted (█ - 07/17/2025)**

In response to the violation on 06/25/2025 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 05/09/2025 by the Caregiver to monitor the residents for adverse reactions and notified the residents, POA's, and doctors.

To enhance the currently compliant operations, on 07/04/2025 the Administrator will educate the med-techs on their responsibility to conduct all three medication checks before administering any medications, with a completion date of 07/09/2025.

Effective 06/30/2025 the Administrator will perform monthly Audit through 12/01/2025 to maintain ongoing compliance with ensuring the home must follow the directions of the prescriber. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 07/09/2025**Implemented (█ - 07/31/2025)**