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

October 22, 2026

[redacted]
ARTMAN LUTHERAN HOME
[redacted]

RE: ARTMAN LUTHERAN HOME
250 BETHLEHEM PIKE
AMBLER, PA, 19002
LICENSE/COC#: 12778

[redacted],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/03/2026 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: *ARTMAN LUTHERAN HOME* **License #**: *12778* **License Expiration**: *02/08/2027*

Address: *250 BETHLEHEM PIKE, AMBLER, PA 19002*

County: *MONTGOMERY* **Region**: *SOUTHEAST*

Administrator

Name: [redacted] **Phone**: [redacted] **Email**: [redacted]

Legal Entity

Name: *ARTMAN LUTHERAN HOME*

Address: [redacted]

Phone: [redacted] **Email**: [redacted]

Certificate(s) of Occupancy

Type: *I-1* **Date**: *04/28/2016* **Issued By**: *Borough of Ambler*

Type: *C-1* **Date**: *02/08/1994* **Issued By**: *CWOPA*

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff**: *173* **Waking Staff**: *130*

Inspection Information

Type: *Partial* **Notice**: *Unannounced* **BHA Docket #**:

Reason: *Complaint, Incident* **Exit Conference Date**: *09/03/2026*

Inspection Dates and Department Representative

09/03/2026 - On-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *136* **Residents Served**: *113*

Secured Dementia Care Unit

In Home: *Yes* **Area**: *Inspiring Today* **Capacity**: *19* **Residents Served**: *17*

Hospice

Current Residents: *8*

Number of Residents Who:

Receive Supplemental Security Income: *0* **Are 60 Years of Age or Older**: *113*

Diagnosed with Mental Illness: *4* **Diagnosed with Intellectual Disability**: *0*

Have Mobility Need: *60* **Have Physical Disability**: *3*

Inspections / Reviews

09/03/2026 Partial

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *09/28/2026*

10/05/2026 - POC Submission

Submitted By: [redacted] **Date Submitted**: *10/22/2026*

Reviewer: [redacted] **Follow-Up Type**: *Document Submission* **Follow-Up Date**: *10/08/2026*

Inspections / Reviews *(continued)*

10/22/2026 Document Submission

Submitted By: [redacted] **Date Submitted:** *10/22/2026*

Reviewer: [redacted] **Follow Up Type:** *Not Required*

25a - Written Contract and Review

1. Requirements

2600.
25.a. Prior to admission, or within 24 hours after admission, a written resident-home contract between the resident and the home shall be in place. The administrator or a designee shall complete this contract and review and explain its contents to the resident and the resident's designated person if any, prior to signature.

Description of Violation

Resident [redacted] admitted [redacted], did not have a resident-home contract completed.

Repeated Violation - [redacted], et al.

Plan of Correction ***Accept [redacted] - 10/05/2026)***

It is the policy of Artman to have a written resident-home contract in place prior to admission, or within 24 hours after admission. In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 09/03/2026 by the Administrative Assistant to contact the POA of resident [redacted] and obtain the signed admission contract.

To enhance the currently compliant operations, on 09/22/2026 the Personal Care Administrator met with the Admissions Administrative Assistant, Director of Admissions, and the Executive Director to review the regulation requirements. A new process was established for obtaining contract signatures. Director of Admissions will use the admissions pending worksheet to document upcoming admissions for Personal Care. The administrative assistant will email the contract to the POA for review and include the deadline date. At least twenty-four hours prior to admission, the Admissions Administrative Assistant will check that the contract has been reviewed and signed and if it has not, they will place a follow up call to the POA. Appointments can be made as necessary with a completion date of 10/5/2026.

Effective 10/05/2026 the Admission Administrative Assistant will perform weekly audits of the new admission contracts, through 12/05/2026 to maintain ongoing compliance with putting in place a written resident-home contract between the resident and the home prior to admission, or within 24 hours after admission, and for the administrator or a designee to complete a contract review and explaining its contents to the resident and the resident's designated person if any, prior to signature. Compliance monitoring activities will be implemented under the supervision of the Director of Admissions. Any deficiencies will be corrected immediately, and findings will be documented and submitted to the Personal Care Administrator for further review and continuous improvement.

Licensee's Proposed Overall Completion Date: *10/05/2026*

Implemented [redacted] - 10/22/2026)

42b - Abuse

2. 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

On [redacted] at 8:40 am, residents [redacted] and [redacted] were in a physical altercation in the common area of the memory care unit. Resident [redacted] was attempting to tidy up the area near the rocking chair that resident [redacted] likes to sit in. Resident [redacted] is known to keep everything tidy and was arranging resident [redacted] s belongings that were in the area. Staff person A

42b Abuse (continued)

whom was assigned to provide care for both residents, observed resident [redacted] trying to keep the area clean. Staff person A stated to resident [redacted] "to not touch resident [redacted] s stuff because [redacted] don't like that and to move away from [redacted] chair." Resident [redacted] continued to touch resident [redacted] s belongings. Staff person B observed resident [redacted] sit in the rocking chair. Resident [redacted] then pulled resident [redacted] out of the chair and pushed the resident to the floor and kicked them in the stomach. Staff intervened before resident [redacted] could kick resident [redacted] again. The residents were separated and resident [redacted] was assess for injuries. No injuries were noted. The two residents had a previous altercation on July 10, 2026 when resident [redacted] went to tell resident [redacted] that breakfast was ready. Resident [redacted] pushed resident [redacted] at the shoulders and knocked the resident to the floor stating "you're [redacted] taking my stuff." Resident [redacted] was not injured.

Plan of Correction ***Accept ([redacted] - 10/05/2026)***

It is the policy of Artman that residents may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way. In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 08/15/2026 by the Personal Care Administrator to ensure resident [redacted] and resident [redacted] remained separated for safety. POA of resident [redacted] notified that 24 hour one to one service was required for safety. Personal Care Administrator remained with resident [redacted] for one to one service until family able to provide relief. Further treatment options for resident [redacted] were investigated.

To enhance the currently compliant operations:

1. *on 08/15/2026 the Personal Care Administrator in serviced secured dementia staff on de escalating dementia behaviors, with a completion date of 08/22/2026.*
2. *on 08/25/2026 the Personal Care Administrator/Unit Manager updated the addendum to resident [redacted] RASP and a behavior monitoring documentation was re established to be able to monitor behaviors post inpatient treatment, with a completion date of 08/29/2026.*

The overall completion date is 08/29/2026.

Effective 08/29/2026 the Unit Manager and Personal Care Administrator will perform monthly reviews to maintain ongoing compliance with not neglecting, intimidating, physically or verbally abusing, mistreating, subjecting to corporal punishment or disciplining residents in any way. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes. Resident [redacted] discharged to another community on 8/29/26.

Licensee's Proposed Overall Completion Date: *09/24/2026*

Implemented [redacted] - 10/22/2026)

81b - Resident Personal Equipment

3. Requirements

2600.
81.b. Wheelchairs, walkers, prosthetic devices and other apparatus used by residents must be clean, in good repair and free of hazards.

Description of Violation

Resident [redacted] has a bedside mobility device that is not securely attached to the bed's structure. The bedside mobility device slides under the mattress and moves when touched creating an entrapment zone. These types of devices are not permitted under any circumstances.

81b Resident Personal Equipment (continued)

Plan of Correction ***Accept [redacted] - 10/05/2026)***

It is the policy of Artman that wheelchairs, walkers, prosthetic devices and other apparatus used by residents be in clean, good repair and free of hazards. In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 09/03/2026 by Maintenance to inspect and secure the bedside mobility device to Resident [redacted]s bed structure.

To enhance the currently compliant operations, on 09/28/2026 the Unit Managers/ Personal Care Administrator will Inservice the household staff, informing them that all enablers must be inspected and installed by maintenance to ensure it is secured to the bed structure, with a completion date of 10/05/2026.

Effective 10/05/2026 the Unit Manager will perform monthly checks of any new enablers, through 12/05/2026 to maintain ongoing compliance with ensuring bedside mobility devices are clean, in good repair and free of hazards. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: *10/05/2026*

Implemented [redacted] - 10/22/2026)