



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**  
**MAILING DATE: January 5, 2016**

Ms. Melissa Hadley, Executive Director  
Asbury Atlantic  
20030 Century Boulevard  
Suite 300  
Germantown, Maryland 20874

RE: Bethany Village Retirement Center  
5225 Wilson Lane  
Mechanicsburg, Pennsylvania 17055  
Certificate #: 330230

Dear Ms. Hadley:

As a result of the Department of Human Services' licensing inspection on September 1, 2015 of the above facility, the violations with 55 Pa.Code Ch. 2800 (relating to Assisted Living Residences) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2800 must be maintained.

Sincerely,

A handwritten signature in cursive script that reads "Gloria Emick".

Gloria Emick  
Human Services Licensing Supervisor

Enclosure  
Licensing Inspection Summary

**LICENSING INSPECTION SUMMARY**  
**Assisted Living Residences - 55 Pa.Code §2800**

<b>Name of Residence:</b> Bethany Village Retirement Center –Maple Wood
<b>Address:</b> 5225 Wilson Lane Mechanicsburg, PA 17055
<b>License Number:</b> 33023
<b>Type of Inspection:</b> Interim
<b>Reason(s) for Inspection</b>
<b>Notice:</b> Unannounced
<b>On-site Inspection Dates and Department Representatives On-Site:</b> 9/1/2015 –Dale Rosenblat
<b>Off-Site Inspection Dates and Inspectors, if Applicable:</b>

RECEIVED

SEP 24 2015

CENTRAL REGION FIELD OFFICE  
Human Services Licensing

**Regulation**

**§ 2800.132. Fire drills.**

(d) Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert. For purposes of this subsection, the fire safety expert may not be a staff person of the residence.

**Violation**

The residence has an evacuation time determined by a fire safety expert of eight minutes. On April 30, 2015 a fire drill was conducted with an evacuation time of 14 minutes and 13 seconds.

**Plan of Correction**

The drill referenced was a sleeping-hours drill occurring at 6:15 am. When the drill exceeded 8 minutes, it should have been redone on another day that month to achieve a compliant evacuation time. The home will implement the following plan of correction:

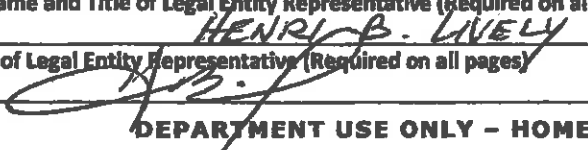
The home's fire safety expert, [REDACTED] in his current letter of September 17, 2015, has noted "staff should be able to evacuate residents to a fire safe area within 9 minutes and 45 seconds from the sounding of the fire alarm system...". This letter replaces the previous time and fire safety expert letter of record for the home, which cited 8 minutes as the acceptable time; an increase of 1 minute and 45 seconds.

The drill referenced also occurred on the very last day of the month, leaving little time for a replacement drill, if needed. Moving forward, drills will be scheduled to accommodate a repeat of the drill within the same month, should an evacuation not be accomplished within 9 minutes and 45 seconds.

A training was held on September 23, 2015 to review this plan of correction and ensure staff understand how to respond promptly during sleeping-hour emergencies, real or simulated, or whatever time of day or night they may occur. Ongoing training will include proper evacuation procedures and feedback reviews following each drill. Training will include tips to reduce time of evacuation including reaction time, pre-evacuation activity time, and travel time, the three time periods of any evacuation process.

An unannounced drill was held at 11:50 pm on September 23, 2015 and the evacuation of residents to the fire safe area was accomplished in 5 minutes and 15 seconds, and added to the log.

Evidence of the training for this plan of correction and the letter meeting the requirements of 2800.132(d) are attached as exhibits.

Printed Name and Title of Legal Entity Representative (Required on all pages)	
HENRI B. LIVELY ADMINISTRATOR	
Signature of Legal Entity Representative (Required on all pages)	Date
	9/24/15
<b>DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!</b>	
The above plan of correction is approved as of <u>1-4-16</u> (Date)	Plan of correction implementation status as of <u>1-4-16</u> : (Date)
The above plan of correction was approved by <u>BE</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented – Adequate Progress <input type="checkbox"/> Partially Implemented – Inadequate Progress <input type="checkbox"/> Not Implemented