

MAILING DATE: February 20, 2019

Mr. Brian K. Wood Vice President and Treasurer EC OPCO Reedsville, LLC 500 North Hurstbourne Parkway, Suite 200 Louisville, Kentucky 40222

> RE: Elmcroft of Reedsville 55 Carriage House Lane Reedsville, Pennsylvania 17084 Certificate #: 333780

Dear Mr. Wood:

As a result of the Department's Bureau of Human Services Licensing inspection on February 11, 2019 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All violations cited on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

Jungen

Brett Swanger Human Services Licensing Supervisor

Enclosure Violation Report

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VIOLATION REPORT PERSONAL CARE HOMES - 55 Pa Code Chapter 2600

PERSONAL CARE HOME	5 - 55 Pa.Code Chapter 2000	<u> </u>	
PCH Name: ELMCROFT OF REEDSVILLE		License Number: 33378	
Address: 55 Carriage House Lane, Reedsville, PA 17084		County; Mifflin	
Administrator: Faithe Soles		Region: CENTRAL	
Legal Entity Name: EC OPCO REEDS VILLE LLC			
Legal Entity Address: 500 North Hurstbourne Parkway, Suite 200, Louisville, KY 40222			
Certificate(s) of Occupancy			
C-2 LP			
10/13/1998 Lábor & Indústry			
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Staffing Hours			
Resident Support: 0 Total Daily Staff	:55 Waking	Waking Staff: 41	
Type of Inspection: Partial BHADocketNu	mber: Notice:	Notice: Unannounced	
Reason(s) for Inspection(s)			
Complaint			
On-Site Inspections Dates and Department Representatives On-Site			
02/11/2019: McCloskey, Jason			
Off-Site Inspection Dates and Inspectors, if Applicable			
02/11/2019: McCloskey, Jason			
Other Details			
Partial or Full Triggers:	Random Indicators:		
Resident Demographic Data as of Inspection Dates			
Licensed Capacity: 72 Number of Residents who:			
Number of Residents Served: 48	Receive Supplemental Security Incom	e: 0	
Secured Dementia Care Unit in Home: No	Are 60 Years of Age or Older: 48		
Area:	Have Mental Illness: 0		
Secured Dementia Unit Capacity, if Applicable:	Have an Intellectual Disabliity: 0		
Number of Residents Served in Secured Dementia Care Unit,	Have a Mobility Need: 7		
if applicable:	Have a Physical Disability: 0		
Number of Current Hospice Residents: 2			
Number of Hospice Residents in past year: 4			

Violation Report: PCH Name: ELMCROFT OF REEDSVILLE

1. REGULATION 55 Pa.Code §2600

2600.88(a) - Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

There are 3 ceiling tiles outside of the dining room that are discolored from moisture and are sagging. One stain measures 7" around and is damp. Another stain covers 2 ceiling tiles and measures approximately 16" x 15".

There are 3 ceiling tiles at the junction of the main front hallway and the 100 hallway (across from bedroom 109) that are damaged from moisture. One tile is crusty and flaking as if it has been saturated and dried out repeatedly. The entire surface of an adjacent ceiling tile is discolored as is a 3rd tile that is about half covered with discoloration.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The three ceiling tiles outside the difining room have been replaced. Root cause determined to be hot water line related and was repaired on 2/15/2019.

The three ceiling tiles at the intersection of the main front hallway and the 100 hallway have been replaced. All pipes were examined by maintenance on 2/15/2019 and determined to be leak-free with no moisture present above the tiles.

Ongoing: Weekly inspections of all ceiling tiles to be performed by maintenance or designee.

Repeat Violation: No	Date(s) of Previous Violation(3);			
Signature of Legal Entity Representative (Required on EVERY Page)				
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Faithe Soles		Date 2/18/2019		
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!				
The above plan of correction	on is approved as of $\frac{2/20/19}{(Date)}$	Plan of correction implementation status as of $\frac{2}{20}$ (Date)		
		Eully Implemented		
		Partially Implemented - Adequate Progress		
The above plan of correctio		Partially Implemented - Inadequate Progress		
	(Initials)	Not Implemented		