

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

July 22, 2025

[REDACTED]  
ARTMAN LUTHERAN HOME  
[REDACTED]  
[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 06/05/2025 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:** ARTMAN LUTHERAN HOME **License #:** 12778 **License Expiration:** 02/08/2026  
**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:** COPA

## Staffing Hours

**Resident Support Staff:** 0 **Total Daily Staff:** 157 **Waking Staff:** 118

## Inspection Information

**Type:** Partial **Notice:** Unannounced **BHA Docket #:**  
**Reason:** Incident **Exit Conference Date:** 06/05/2025

## Inspection Dates and Department Representative

06/05/2025 - On-Site: [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

**License Capacity:** 136 **Residents Served:** 99

## Secured Dementia Care Unit

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

## Hospice

**Current Residents:** 6

## Number of Residents Who:

**Receive Supplemental Security Income:** 0 **Are 60 Years of Age or Older:** 99  
**Diagnosed with Mental Illness:** 5 **Diagnosed with Intellectual Disability:** 0  
**Have Mobility Need:** 58 **Have Physical Disability:** 2

## Inspections / Reviews

06/05/2025 Partial

**Lead Inspector:** [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 07/06/2025

07/07/2025 - POC Submission

**Submitted By:** [REDACTED] **Date Submitted:** 07/22/2025  
**Reviewer:** [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 07/22/2025

Inspections / Reviews *(continued)*

07/22/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 07/22/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

## 95 - Furniture and Equipment

## 1. Requirements

2600.

95. Furniture and Equipment - Furniture and equipment must be in good repair, clean and free of hazards.

## Description of Violation

On [REDACTED], at 7:30pm, resident # [REDACTED] son was in the bathroom with the resident. When closing the bathroom closet door, the door came off the pins in the door frame that allow the door to open and close. The door fell forward into the bathroom, and struck resident [REDACTED] on the head. Resident [REDACTED] was sent to the hospital after blood was observed on their head, and the resident complained of pain on the side of their body. Resident [REDACTED] returned to the home with fractured ribs and received two staples for a laceration on their head.

On [REDACTED], resident [REDACTED] pendant stopped functioning for 4 days. Instead of repairing or replacing the pendant alert button, the resident was told to just use an emergency pull cord, which caused resident [REDACTED] to become anxious because an emergency pull cord is not available in all areas.

## Plan of Correction

Accept ([REDACTED] 07/07/2025)

It is the policy of Artman to keep furniture and equipment in good repair, clean, and free of hazards. In response to the violation on 06/05/2025 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 04/05/2025 to remove resident [REDACTED] bathroom door by the maintenance department. Per the request of the resident and family, the door was not reattached. On 06/05/2025, resident [REDACTED] pendant was immediately repaired by the maintenance department and returned to the resident.

To enhance the currently compliant operations, on 04/07/2025 all 1-bedroom apartment closet doors were inspected by the Maintenance Department. On 4/28/25 the contractor modified the bathroom closet doors with cable/bolt hardware system to prevent the doors from falling if the pin falls out. Pictures of the completed work in all 1-bedroom apartments were taken by the the licensing inspector.

Effective 07/02/2025 the Direct Care Staff will perform monthly room audits through 09/30/2025 to maintain ongoing compliance with ensuring furniture and equipment is in good repair, clean and free of hazards. The Maintenance Department will inspect each room prior to any new move ins. Any deficiencies will be corrected immediately, and findings will be documented and reported to the Unit Managers for further review and continuous improvement.

Licensee's Proposed Overall Completion Date: 07/01/2025

Implemented ([REDACTED] 07/22/2025)

## 225a - Assessment 15 Days

## 2. Requirements

2600.

225.a. A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

## Description of Violation

Resident [REDACTED] was admitted on [REDACTED]; however, the resident's assessment was not completed until [REDACTED]

225a Assessment 15 Days (continued)

**Plan of Correction**

Accept [redacted] - 07/07/2025)

*It is the policy of Artman to complete a written initial assessment within 15 days of admission. In response to the violation on 06/05/2025 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 06/06/2025 by the Unit Managers who audited the Assessments of the residents admitted since January 2025 to check for compliance.*

*To enhance the currently compliant operations, starting 07/02/2025 the PCA will provide in service training to the Unit Managers and Lead Medication Technician on the appropriate timeline for completing assessments, with a completion date of 07/15/2025.*

*Effective 07/02/2025 the Lead Medication Technician and PCA will perform monthly audits through 09/30/2025 and then periodically to maintain ongoing compliance with ensuring each resident has a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment. Any deficiencies will be corrected immediately, and findings will be documented and reported to the PCA for further review and continuous improvement.*

Licensee's Proposed Overall Completion Date: 07/15/2025

Implemented [redacted] - 07/22/2025)

227g -Support Plan Signatures

**3. Requirements**

2600.

227.g. Individuals who participate in the development of the support plan shall sign and date the support plan.

**Description of Violation**

*Resident [redacted] participated in the development of [redacted] support plan on [redacted]. However, the resident did not sign the support plan.*

**Plan of Correction**

Accept [redacted] 07/07/2025)

*It is the policy of Artman to have individuals who participate in the development of the support plan to sign and date the support plan.*

*To enhance the currently compliant operations, starting 07/02/2025 the PCA will provide in service training to the Unit Managers and Lead Medication Technician on ensuring signatures are obtained by the residents on the support plan, with a completion date of 07/15/2025.*

*Effective 07/02/2025 the Lead Medication Technician, Unit Managers, and PCA will perform monthly audits through 09/30/2025 and then periodically to maintain ongoing compliance with ensuring individuals, who participate in the development of the support plan, sign and date the support plan. Any deficiencies will be corrected immediately, and findings will be documented and reported to the PCA for further review and continuous improvement.*

Licensee's Proposed Overall Completion Date: 07/15/2025

Implemented [redacted] - 07/22/2025)