

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

May 5, 2025

[REDACTED]  
EVERGREEN ESTATES HOLDINGS LLC  
[REDACTED]

RE: EVERGREEN ESTATES RETIREMENT  
COMMUNITY  
1300 EAST KING STREET  
LANCASTER, PA, 17602  
LICENSE/COC#: 33193

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/25/2025 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:** EVERGREEN ESTATES RETIREMENT COMMUNITY      **License #:** 33193      **License Expiration:** 03/13/2026  
**Address:** 1300 EAST KING STREET, LANCASTER, PA 17602  
**County:** LANCASTER      **Region:** CENTRAL

**Administrator**

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

**Legal Entity**

**Name:** EVERGREEN ESTATES HOLDINGS LLC  
**Address:** [REDACTED]  
**Phone:** [REDACTED]      **Email:** [REDACTED]

**Certificate(s) of Occupancy**

Type: C-2 LP	Date: 06/15/2000	Issued By: Labor & Industry
Type: I-2	Date: 10/17/2019	Issued By: Lancaster Township
Type: I-1	Date: 02/05/2008	Issued By: Lancaster Township

**Staffing Hours**

**Resident Support Staff:** 0      **Total Daily Staff:** 134      **Waking Staff:** 101

**Inspection Information**

**Type:** Partial      **Notice:** Unannounced      **BHA Docket #:** 0  
**Reason:** Incident      **Exit Conference Date:** 03/25/2025

**Inspection Dates and Department Representative**

03/25/2025 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 125      **Residents Served:** 89

**Secured Dementia Care Unit**

**In Home:** Yes      **Area:** Memory Care      **Capacity:** 13      **Residents Served:** 11

**Hospice**

**Current Residents:** 6

**Number of Residents Who:**

<b>Receive Supplemental Security Income:</b> 0	<b>Are 60 Years of Age or Older:</b> 84
<b>Diagnosed with Mental Illness:</b> 1	<b>Diagnosed with Intellectual Disability:</b> 1
<b>Have Mobility Need:</b> 45	<b>Have Physical Disability:</b> 6

**Inspections / Reviews**

03/25/2025 Partial

**Lead Inspector:** [REDACTED]      **Follow-Up Type:** POC Submission      **Follow-Up Date:** 04/07/2025

Inspections / Reviews (*continued*)

## 04/07/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/21/2025

Reviewer: [REDACTED]

Follow Up Type: POC Submission

Follow Up Date: 04/14/2025

## 04/14/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/21/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 05/02/2025

## 05/05/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/21/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

82c - Locking Poisonous Materials

1. Requirements

2600.

82.c. Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

Description of Violation

On [REDACTED], at approximately 6:15 PM, Resident [REDACTED] ingested Sea Breeze astringent facial cleanser with the intent to overdose. Resident [REDACTED] was sent to the Emergency Room and was admitted for observation. The resident returned to the home on [REDACTED]. Following the incident, the resident is no longer capable of using poisons safely. However, on [REDACTED], at approximately 12:00 PM, a full, unopened bottle of Scope mouthwash, 3 cannisters of Clorox disinfecting wipes, a bottle of Johnson's wash and shampoo with labels stating "to contact poison control if ingested" were observed in the resident's room.

Plan of Correction

Accept [REDACTED] - 04/14/2025)

The resident is currently out at the Lebanon VA unknown anticipated return date.

The Administrator removed an unopened bottle of scope mouthwash and Clorox sanitizing wipes from the room.

The Resident Care Coordinator did a check of rooms in the community and removed any prohibited items from residents' rooms.

The home will conduct ongoing room audits weekly done by the RRC, DON or assigned aid for 30 days and record the results.

A letter was sent to the residents POA regarding the resident cannot have the scope or any other item which could be considered a potential danger to the resident

The bottle of scope was removed by the administrator on 3/25/25

The Resident care coordinator started conducting room audits on 3/27/2025

The Residents POA was sent a letter on 3/28/25 by the Administrator.

Education was provided on 3/24/25 and 3/25/25 during the all-staff meeting by the Executive Director and DON

Proposed Overall Completion Date: 04/30/2025

Licensee's Proposed Overall Completion Date: 04/30/2025

Implemented [REDACTED] 04/22/2025)

141b2 - Medical Evaluation Changes

2. Requirements

2600.

141.b.2. A resident shall have a medical evaluation: If the medical condition of the resident changes prior to the annual medical evaluation.

Description of Violation

On [REDACTED], at approximately 6:15 PM, Resident [REDACTED] ingested Sea Breeze astringent facial cleanser with the intent to

**141b2 - Medical Evaluation Changes (continued)**

overdose. Resident [REDACTED] was sent to the Emergency Room and was admitted for observation. Following the incident, the resident is no longer capable of using poisons safely. However, a new medical evaluation has not been completed.

**Plan of Correction****Accept [REDACTED] 04/14/2025)**

The DON prepared a new DME for signature on 3/26/25, the resident is out of the facility at the Lebanon VA. The administrator went to the Lebanon VA on 3/28/25 and hand delivered the DME to the charge nurse in the resident's wing for signature requesting it be signed and returned to the community.

The Administrator left a message for the resident's social worker asking if the DME was signed the social worker did not respond and the Administrator will contact the social worker again by phone, email or in person the week of 4/7/25

The Administrator also delivered a DME to the residents PCP at the VA clinic at Willow Lakes on 4/3/25, the Administrator will follow up with the VA Clinic on 4/7/25

The DON prepared a new RASP for the resident identifying the resident's inability to safely handle any poisonous item, on 3/26/25

All potentially hazardous items were removed from the resident's room 3/25/25

The DON and RCC started a new audit of all residents DMEs on 4/1/2025

All Residents DME's will be reviewed Quarterly by the DON, RCC, BOM, Administrator or other designated employee. Starting on 6/1/25

An initial audit of DME's will be completed by the DON, RCC or other assigned staff member to be completed by 4/30/25

Starting after the 4/30/25 initial audit the home will review quarterly all residents DME, s for compliance documenting the completion of the audit on a quarterly tracking sheet. The first ongoing audit will begin in June of 2025

The DON, RCC BOM, DOS, DODs and DOM will be educated by the on 4/14/2025

Proposed Overall Completion Date: 06/25/2025

Licensee's Proposed Overall Completion Date: 04/30/2025

Implemented ([REDACTED] - 05/05/2025)