

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

December 17, 2024

[REDACTED]
EC OPCO LEBANON PA LLC

[REDACTED]
ECLIPSE SR LIV ATTN LICENSING

RE: CELEBRATION VILLA OF LEBANON
860 NORMAN DRIVE
LEBANON, PA, 17042
LICENSE/COC#: 33376

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/22/2024, 10/23/2024 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: CELEBRATION VILLA OF LEBANON **License #:** 33376 **License Expiration:** 08/01/2025
Address: 860 NORMAN DRIVE, LEBANON, PA 17042
County: LEBANON **Region:** CENTRAL

Administrator

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

Legal Entity

Name: EC OPCO LEBANON PA LLC

Address: [REDACTED]

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

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 08/10/1999 **Issued By:** Labor and Industry

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 55 **Waking Staff:** 41

Inspection Information

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

Reason: Renewal, Complaint, Incident **Exit Conference Date:** 10/23/2024

Inspection Dates and Department Representative

10/22/2024 - On-Site: [REDACTED]

10/23/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates**General Information**

License Capacity: 65

Residents Served: 53

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 7

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 53

Diagnosed with Mental Illness: 2

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 2

Have Physical Disability: 3

Inspections / Reviews

10/22/2024 Full

Lead Inspector: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 11/14/2024

11/13/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/16/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission **Follow-Up Date:** 11/25/2024

Inspections / Reviews (*continued*)

12/17/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/16/2024

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

141b1 - Annual Medical Evaluation

1. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident [REDACTED] current medical evaluation was completed [REDACTED]. The resident's previous medical evaluation was completed on [REDACTED].

Repeated Violation - 9/19/23

Plan of Correction

Accept [REDACTED] - 11/13/2024

Action: On [REDACTED] Administrator, Director of Nursing, and Resident Care Coordinator reviewed current medical record audit tool. A complete audit will be completed by [REDACTED] of all Resident Medical Evaluations for compliance. Medical Evaluation tickler system tracker form now changed that residents with an outside provider will have their evaluations scheduled 60 days prior to the due date of medical evaluation, in order to provide ample time for the provider to complete paperwork.

Training: Director of Nursing and Resident Care Coordinator were re-educated on regulation 2600.141.b.1 by the Administrator on [REDACTED].

Ongoing: Director of Nursing, Resident Care Coordinator and/or Administrator will conduct monthly audits of resident medical evaluations beginning in November of 2024. Administrator will oversee audit completion. Audits will be reviewed at monthly Quality Assurance Meeting beginning in December of 2024.

Licensee's Proposed Overall Completion Date: 11/30/2024

Implemented [REDACTED] - 12/17/2024

183e - Storing Medications

2. Requirements

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

Description of Violation

There was a blue, half-tablet loose in the home's east medication cart.

Resident [REDACTED] is prescribed [REDACTED]. One of the blisters containing a tablet was punctured and taped over with medical tape.

Plan of Correction

Accept [REDACTED] - 11/13/2024

Action: On [REDACTED], the loose blue half-tablet was destroyed immediately by Lead Med Tech and a second Med Tech. Also, the [REDACTED] tablet was also destroyed at the same time. Medication Carts were audited for any other violations of regulation 2600.183.e None found.

Training: Director of Nursing and Resident Care Coordinator were re-educated on regulation 2600.183.e on November 5, 2024 by the Administrator. All Med Techs were re-trained by the Director of Nursing in proper medication storage and regulation 2600.183.e on November 6, 2024.

Ongoing: A daily medication cart audit will be completed starting November 6, 2024 and will continue for 30 days. At that point, audits will transition to three times per week for 30 days. If no issues found, then audits would transition to weekly thereafter. Audits will be conducted randomly by the Director of Nursing, Resident Care

183e Storing Medications (continued)

Coordinator and/or the Med Tech assigned on shift. Audits will be reviewed monthly, beginning in December 2024, at the Quality Assurance Meeting.

Licensee's Proposed Overall Completion Date: 01/04/2025

Implemented [REDACTED] - 12/17/2024