

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

November 14, 2025

[REDACTED]
2618 E MARKET STREET OPERATING COMPANY LLC
[REDACTED]

RE: AUTUMN HOUSE EAST
2618 EAST MARKET STREET
YORK, PA, 17402
LICENSE/COC#: 33823

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/15/2025, 10/16/2025 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: AUTUMN HOUSE EAST **License #:** 33823 **License Expiration:** 10/11/2025
Address: 2618 EAST MARKET STREET, YORK, PA 17402
County: YORK **Region:** CENTRAL

Administrator

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

Legal Entity

Name: 2618 E MARKET STREET OPERATING COMPANY LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 04/27/2024 **Issued By:** Labor & Industry
Type: I-1 **Date:** 08/11/2020 **Issued By:** Springett bury Township

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 177 **Waking Staff:** 133

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:** 0
Reason: Complaint, Interim **Exit Conference Date:** 10/16/2025

Inspection Dates and Department Representative

10/15/2025 - On-Site: [REDACTED]
 10/16/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 150 **Residents Served:** 120

Secured Dementia Care Unit

In Home: Yes **Area:** Laurel Court **Capacity:** 32 **Residents Served:** 31

Hospice

Current Residents: 15

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 120
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 57 **Have Physical Disability:** 2

Inspections / Reviews

10/15/2025 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 11/03/2025

Inspections / Reviews (*continued*)

10/29/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/05/2025

Reviewer: [REDACTED]

Follow Up Type: POC Submission

Follow Up Date: 11/05/2025

10/30/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/05/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 11/18/2025

11/14/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/05/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

17 - Record Confidentiality

1. Requirements

2600.

17. Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

Description of Violation

On [REDACTED] at approximately 10:00 AM, Resident [REDACTED]'s list of medications were unlocked, unattended, and accessible in the A-hall kitchenette.

Repeated Violation - [REDACTED] et al

Plan of Correction

Accept [REDACTED] - 10/29/2025)

Resident information was moved from the A-hall kitchenette on 10/15/25 by Resident Care Coordinator and filed appropriately. Resident Care Coordinator to perform daily audits of med carts and common areas to ensure confidentiality of residents' information. This audit will continue for one month beginning on 10/27/25. Nursing staff education regarding resident confidentiality to be done by the Director of Wellness and Resident Care Coordinator on 10/28/25.

Licensee's Proposed Overall Completion Date: 11/27/2025

Implemented [REDACTED] 11/12/2025)

18 - Compliance With Laws

2. Requirements

2600.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

According to the Care Facility Carbon Monoxide Alarm Standards Act, if the approved CO alarm cannot be heard by the staff on duty on a specific floor or wing of the home, a single approved carbon monoxide alarm shall be installed where it can be heard by the staff on duty in addition to the alarm installed in close proximity of, but not less than 15 feet from any fossil-fuel burning device or appliance. On [REDACTED] at 9:30 AM, a CO detector was not present on the first floor of the secured dementia care unit. The installed CO alarms could not be heard from this area. The home has fossil fuel boilers, dryers and a gas stove.

Plan of Correction

Accept [REDACTED] 10/30/2025)

Maintenance Director installed a new CO detector on the first floor of the secured dementia care unit on 10/15/25 while the inspector was present. Map of the building with the placement of all CO detectors was also given to the inspector on that date as well. Education was provided to the Maintenance Director on proper placement of CO detectors by the Administrator on 10/15/25. Maintenance Director to audit all CO detectors quarterly to ensure proper placement and that they are working properly. Audit to begin 11/1/25.

Licensee's Proposed Overall Completion Date: 11/01/2025

18 Compliance With Laws *(continued)*

Implemented ([REDACTED] 11/12/2025)

85b Infestation

3. Requirements

2600.

85.b. There may be no evidence of infestation of insects or rodents in the home.

Description of Violation

On [REDACTED] at approximately 2:00 PM, a mouse ran out from underneath Resident [REDACTED] closet and disappeared beneath the resident's baseboard heater.

Plan of Correction*Accept [REDACTED] - 10/30/2025)*

Maintenance Director had Ehrlich extermination company and lay bait traps in residents' room on 10/17/25.

Education on Regulation 85b given to the Maintenance Director by the Administrator on 10/16/25. Maintenance Director to perform daily checks of the room and surrounding area to ensure no further rodent activity is noticed beginning on 10/18/25. These checks to continue for a one-month time period.

Licensee's Proposed Overall Completion Date: 11/18/2025

Implemented [REDACTED] - 11/12/2025)