

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

March 14, 2025

[REDACTED]
MESSIAH HOME INC
[REDACTED]

RE: MESSIAH LIFEWAYS AT MESSIAH
VILLAGE
100 MT. ALLEN DRIVE
MECHANICSBURG, PA, 17055
LICENSE/COC#: 34291

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/28/2025 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: MESSIAH LIFEWAYS AT MESSIAH VILLAGE **License #:** 34291 **License Expiration:** 11/03/2025
Address: 100 MT. ALLEN DRIVE, MECHANICSBURG, PA 17055
County: CUMBERLAND **Region:** CENTRAL

Administrator

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

Legal Entity

Name: MESSIAH HOME INC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: Other **Date:** 07/12/1978 **Issued By:** O&I
Type: I-1 **Date:** 03/21/2019 **Issued By:** Upper Allen Township
Type: Other **Date:** 11/06/2017 **Issued By:** Upper Allen Township

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 199 **Waking Staff:** 149

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident **Exit Conference Date:** 01/28/2025

Inspection Dates and Department Representative

01/28/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
License Capacity: 190 **Residents Served:** 149
Secured Dementia Care Unit
In Home: Yes **Area:** Laurel, upper **Capacity:** 76 **Residents Served:** 38
Hospice
Current Residents: 0
Number of Residents Who:
Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 149
Diagnosed with Mental Illness: 1 **Diagnosed with Intellectual Disability:** 1
Have Mobility Need: 50 **Have Physical Disability:** 2

Inspections / Reviews

01/28/2025 Partial
Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 02/04/2025

Inspections / Reviews (*continued*)

02/05/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 03/13/2025

Reviewer: [REDACTED]

Follow Up Type: POC Submission

Follow Up Date: 02/12/2025

02/18/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 03/13/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 03/14/2025

03/14/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/13/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [REDACTED] at 6:00 AM, Staff Person A and Staff Person B were supporting Resident [REDACTED] with personal care and morning routine. According to the statement of Staff Person B, Staff Person A became frustrated with Resident [REDACTED] and threw Resident [REDACTED] leg brace at the resident, hitting the resident in the chest with the brace. Staff Person B reported Staff Person A was "frustrated" with the resident and after throwing the leg brace at the resident, Staff Person A left the room to find another employee to assist Resident [REDACTED]. Resident [REDACTED] communicated that [REDACTED] felt hurt as a result of the incident but was not physically hurt. Resident [REDACTED] reported [REDACTED] did not want Staff Person A to return to their room. Staff Person A was an agency staff and was no longer allowed to work at the home as a result of the incident.

Plan of Correction

Accept [REDACTED] 02/18/2025)

Staff Person A was immediately suspended pending the investigation. Since Staff Person A was a contracted agency aide, the agency was notified of the suspension and additional information was requested from the agency so required reporting could occur. Interviews were performed by the Enhanced Living Director of Nursing with Resident [REDACTED] and involved Staff Persons. Signed statements were obtained by Enhanced Living Leadership from Resident [REDACTED], Staff Person A and B and Nurse who was working during the time of the reported incident. Resident [REDACTED] POA was notified of incident. At the conclusion of the investigation, the abuse was substantiated and Staff Person A who was working at the facility as a contracted agency staff member was terminated and was informed not to return to the facility. The investigation also indicated that all required protocols were followed in an effort to prevent abuse such as criminal background checks, orientation, abuse and neglect policy review and additional training which will continue with all new hires and current direct care staff members as required. All direct care staff will receive additional abuse and neglect education by Nurse Educator by March 4, 2025 which will address types of abuse and neglect, requirement to report suspected abuse and neglect as a mandated reporter and the prevention of abuse and neglect.

On the second Tuesday of each month-resident interviews will be held at random on each hall in Enhanced Living (Personal Care) at Messiah. These interviews will indicate if the residents feel safe and if they have any concerns. The interviews will be done for the whole year of 2025 and will start in March. The Enhance Living Social Workers will hold the interviews. Any concerns found during these interviews will be brought to the attention of the Administrator who will then perform an investigation.

Proposed Overall Completion Date: 02/14/2025

Licensee's Proposed Overall Completion Date: 03/11/2025

Implemented [REDACTED] - 03/14/2025)