

FEB 0 5 2019

Ms. Holly Schade Senior VP Home & Health Services ACTS Retirement – Life Communities, Inc. 375 Morris Road West Point, Pennsylvania 19486

RE: Oakbridge Terrace at Fort Washington Estates

735 Susquehanna Road

Fort Washington, Pennsylvania 19034

License #: 138940

Dear Ms. Schade:

As a result of the Department's Bureau of Human Services Licensing annual inspection on December 13, 2018 of the above facility, the violations with 55 pa. Code Ch. 2800 (relating to Assisted Living Residence) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 pa. Code Ch. 2800 (relating to Assisted Living Residence) must be maintained.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

Ja¢queline L. Rowe

Director

Enclosure Violation Report

LICENSING INSPECTION SUMMARY Assisted Living Residences – 55 Pa.Code § 2800

ALR Name:		License Number:
Oakbridge Terrace at Fort Washington Estates	1	138940
Addressi		Calladin
795 Susquehanna Road		County: Montgomery
Fort Washington, Pennsylvania 19034		monte ontal A
Administrator:		and the second s
Karen Hinton		EBEOVEM
Legal Entity Name;		
Acts Retirement Life Communities, inc	T Produce	JAN 1 7 2019
	[J.J.]	la
Legal Entity Address:	lay.	- Color semination and a second
375 Morris Road	To exceed see	A.A. Tark C. S. C. Code A. Code
West Point, Pennsylvania 19486 Certificate(s) of Occupancy:		
C2, LP (L&I)		
09/17/98	•	
Type of Inspection:		
Full :		
Reason(s) for Inspection(s):		
Renewal	Nune On Clin	
On-Site Inspections Dates and Department Representa December 13, 2018	tives On-Site!	
David Carrion	e e	
Off-Site Inspection Dates and Inspectors, if Applicable:		
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 18	Number of Residents who:	
Number of Residents Served: 15	Receive Supplemental Security I	ncome: 0
Secured Dementia Care Unit in Home: NO	Are 60 Years of Age or Older: 15	
Area: NA	Have Mental Iliness: 0	
Secured Unit Capacity, if Applicable	Have an Intellectual Disability: 0	
•		·
Number of Residents Served in Secured Dementia	Have a Mobility Need: 0	
Care Unit, if applicable: NA	17 mb 1 mc 1 life 0	
Number of Cusses Hearing Positionts (Have a Physical Disability: 0	
Number of Current Hospice Residents: 0	_	XXCCA ACC
· ·	•	-
Number of Hospice Residents in past year: 0		*

LICENSING INSPECTION SUMMARY Assisted Living Residences ~ 55 Pa.Code § 2800

Regulation $2800.42(s)$ - A resident has the right to provided to the resident during bathing, dressing, ch	rivacy of self and possessions. Privacy shall be sanging and medical procedures.	
Violation A camera is located at the exit in the right wing of Oakbridge Terracrecorded.	ce. There are no signs or posting indicating that images are being	
Plan of Correction	,	
Signs were purchased and posted at both entrar that cameras are in use. The maintenence and s on the importance of maintaining the signs and the to ensure signage is in place. Results will be rep	heir purpose. Roufine rounds will be conducted	
Maintain audits for Department review for a period of three y	years. 2/4/1971()	
	·	
	·	
• • •		
	•	
•	-	
•		
,		
rinted Name and Title of Legal Entity Representative (Required on all page	gael	
Karen Hinton, Assisted Living Administrator lenature of Legal Entity Representative Inequired on all pages)	Date 1/16/19	
DEPARTMENT USE ONLY "HOMES!	MAY NOT WRITE BELOW THIS LINE!	
PREAMINANT GOA CITATION OF THE PROPERTY OF THE		
The above plan of correction is approved as of 2/4/19 (Date)	Plan of correction implementation status as of 2/4/19 (Date) 2 Fully implemented	
The above plan of correction was approved by M	n Partially Implemented – Adequate Progress	
0	∃ Partially implemented – inadequate Progress	
	☐ Not Implemented Page 2 of 3	
	rage 2 01 3	

LICENSING INSPECTION SUMMARY Assisted Living Residences – 55 Pa.Code § 2800

Regulation 2800 100/s)
Regulation 2800,190(a) - A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.
Violation
Staff member's A and B did not complete the Annual Practicum for 2018. Last documented annual training was 10/2017.
Medication administration observations as well as MAR reviews were completed for both staff members (A & B) on 12/12/18. They both were recertified on that date. Both employees had their first observation for 2018 in May 2018. Going forward, all Medication Technicians will have their medication observations and MAR audits 6 months apart during each year. An audit of all Medication Technician files was done on 12/12/18 and will be done routinely to ensure compliance. The audits will be reported to the QAPI committee.
Maintain audits for Department review for a period of three years. 2/4/1970

Karen Hinton, Assisted Living Administrator Signature of real Entity Representative (Required on all	Date 1/16/19
The above plan of correction is approved as of	MAY NOT WRITE BELOW THIS LINE:
The above plan of correction was approved by M. (Date) (Date) (Date)	Plan of correction implementation status as of 2/4/19 (Date) Fully implemented Partially implemented Adequate Progress Partially implemented Inadequate Progress Not implemented