



pennsylvania
DEPARTMENT OF HUMAN SERVICES

FEB 08 2019

Ms. Holly Schade
Senior Vice President Health and Home Services
ACTS Retirement-Life Community, Inc.
375 Morris Road
West Point, Pennsylvania 19486

RE: Oakbridge Terrace at Granite Farms Estates
1343 West Baltimore Pike
Media, Pennsylvania 19063
License #: 138900

Dear Ms. Schade:

As a result of the Department's Bureau of Human Services Licensing annual inspection on December 18, 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. 2600 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.

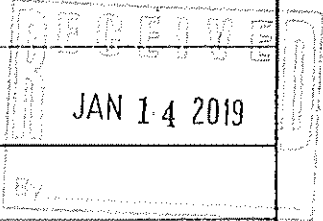
Sincerely,

A handwritten signature in black ink that reads "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
Violation Report

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

| | |
|--|---|
| ALR Name: Oakbridge Terrace at Granite Farms Estates | License Number: 138900 |
| Address: 1343 W Baltimore Pike, Media, PA 19063 | County: Delaware |
| Administrator: Kathleen Brusco |  |
| Legal Entity Name: Acts Retirement Life Communities Inc. | |
| Legal Entity Address: 375 Morris Road, West Point, PA 19486 | |
| Certificate(s) of Occupancy: I-1/R-2 (Township of Middletown) 04/25/2017 | |
| Type of Inspection: Full | |
| Reason(s) for Inspection(s): Renewal | |
| On-Site Inspections Dates and Department Representatives On-Site: December 18, 2018- Youn Hie Chung, Jennie Helnberg | |
| Off-Site Inspection Dates and Inspectors, If Applicable: N/A | |
| Resident Demographic Data as of Inspection Dates | |
| Licensed Capacity: 44 Number of Residents Served: 31 Secured Dementia Care Unit in Home: no Area: n/a Secured Unit Capacity, if Applicable: n/a Number of Residents Served in Secured Dementia Care Unit, if applicable: n/a Number of Current Hospice Residents: 1 Number of Hospice Residents in past year: 2 | Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 31 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 0 Have a Physical Disability: 0 |

LICENSING INSPECTION SUMMARY

Assisted Living Residences – 55 Pa.Code § 2800

Regulation 2800.107(d) - The written emergency procedures shall be reviewed, updated, and submitted annually to the local emergency management agency.

Violation: The home did not submit its emergency procedures to the local emergency management agency in 2017 or 2018.

Plan of Correction:

The Director of Assisted Living will submit the emergency procedures to the local emergency management agency for 2019 by January 31, 2019. As part of the Quality Assurance Performance Improvement Program, each January the emergency procedures will be reviewed, updated and submitted to the local emergency management agency by the Director with documented evidence of compliance submitted to the QAPI Committee.

Administrator will develop a check list to track annual items due dates and will ensure that the same are diligently completed in adherence to reg. 2800 107d.

1/30/19

AAA

Empty rectangular box for additional notes or comments.

Printed Name and Title of Legal Entity Representative (Required on all pages)
Kathleen Brusco, RN, Director of Assisted Living
Signature of Legal Entity Representative (Required on all pages) Kathleen Brusco Date 1/14/19

DEPARTMENT USE ONLY – HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 1/30/19
(Date)

Plan of correction implementation status as of 1/30/19
(Date)

The above plan of correction was approved by AAA
(Initials)

- Fully Implemented
- Partially Implemented – Adequate Progress
- Partially Implemented – Inadequate Progress

LICENSING INSPECTION SUMMARY

Assisted Living Residences – 55 Pa.Code § 2800

Regulation 2800.132 (f) - Alternate exit routes shall be used during fire drills.

Violation: The home has used the same exit routes, stairwells 1, 2, and 3, since Feb 2018.

Plan of Correction:

Education will be provided to the Maintenance, Security and Assisted Living staff by January 31, 2019 regarding the requirement for utilizing alternate exit routes during fire drills. Fire drill procedures will be reviewed with assisted living residents during the January Resident Council meeting. The Director of Assisted Living/designee will partner with a maintenance/security representative prior to each drill to determine a path of egress during the drill to ensure alternate routes. Results of the drill will be documented and reported to the Quality Assurance Performance Improvement Committee monthly by the Director of Assisted Living.

Administrator or a designee will review all completed fire drills monthly to ensure adherence to reg. 2800.132f. Such review shall be documented. 1/30/19

AAA

Printed Name and Title of Legal Entity Representative (Required on all pages)
Kathleen Brusco, RN, Director of Assisted Living

Signature of Legal Entity Representative (Required on all pages) Date *1/14/19*
Kathleen Brusco

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

Regulation 2800.141(a)(2) - The medical evaluation must include the following:

- (1) A general physical examination by a physician, physician's assistant or nurse practitioner.
- (2) Medical diagnosis including physical or mental disabilities of the resident, if any.
- (3) Medical information pertinent to diagnosis and treatment in case of an emergency.
- (4) Special health or dietary needs of the resident.
- (5) Allergies.
- (6) Immunization history.
- (7) Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
- (8) Body positioning and movement stimulation for residents, if appropriate.
- (9) Health status.
- (10) Mobility assessment, updated annually or at the Department's request.
- (11) An indication that a tuberculin skin test has been administered with negative results within 2 years; or if the tuberculin skin test is positive, the result of a chest X-ray. In the event a tuberculin skin test has not been administered, the test shall be administered within 15 days after admission.
- (12) Information about a resident's day-to-day assisted living service needs.

Violation: Resident #1, admitted on 07/18/2018, had her initial medical evaluation completed on 06/13/2018. The ADME did not answer the Immunizations and Tuberculosis Testing section.

Plan of Correction:

The ADME for Resident #1 was reviewed and clarified and the immunizations and tuberculosis testing sections were answered.

A full house audit will be completed of the ADME to ensure the Immunization and Tuberculosis Testing section is complete. Clarification for each ADME will be provided as needed.

Education will be provided to staff by January 31, 2019 on ensuring the immunization and tuberculosis testing sections on the ADME are completed, the current immunization and tuberculosis testing is documented and/or the need for testing to be completed.

The Director of Assisted Living/designee will review each ADME as they are completed to ensure compliance. Results of the review will be reported monthly by the DAL to the QAPI Committee for 12 months.

Printed Name and Title of Legal Entity Representative (Required on all pages)

Kathleen Brucko, RN, Director of Assisted Living

Signature of Legal Entity Representative (Required on all pages)

Kathleen Brucko

Date

1/14/19

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(Date)

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(Initials)

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(Date)

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Partially Implemented -- Inadequate Progress

Not Implemented

LICENSING INSPECTION SUMMARY

Assisted Living Residences – 55 Pa.Code § 2800

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| Regulation 2800.187 (d) - The residence shall follow the directions of the prescriber. |
| <p>Violation: Resident #2, admitted on 06/14/2018, has an order for insulin injections as per sliding scale.</p> <p>On 12/08/2018, his blood sugar was entered as 104 when the actual glucometer reading was 212. The resident should have received 6 units of insulin per sliding scale. The resident only received 4 units of insulin.</p> |
| <p>Plan of Correction:</p> <p>Orders for Resident #2 were reviewed, and a medication error report completed.</p> <p>The daytime 7A-3P nurse will review the electronic documentation of blood sugars and review the glucometer reading to ensure electronic documentation is accurate and physician orders were followed as directed, daily for 30 days, then weekly for 3 months. After this time, the review will occur monthly.</p> <p>The Director of Assisted Living will provide education to all licensed nurses on accurate documentation of glucometer readings and following physician orders for the administration of insulin.</p> <p>Results of the reviews for accurate glucometer reading documentation and subsequent following of physician orders will be reported to the Quality Assurance Performance Improvement Committee by the Director of Assisted Living monthly for the next 12 months.</p> |

Within 15 days of receiving this POC, Administrator will re-train staff on diabetic education and insulin medication; including sliding scale injection of insulin. Staff shall be re-trained on accurate documentation of glucometer testing results. Routine audit/review of glucometer readings, electronic documentation of reading shall be documented. 1/30/19

A.A.A

| | |
|---|---|
| Printed Name and Title of Legal Entity Representative (Required on all pages) | |
| Kathleen Brusco, RN, Director of Assisted Living | |
| Signature of Legal Entity Representative (Required on all pages) | Date |
| <i>Kathleen Brusco</i> | 1/14/19 |
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| The above plan of correction is approved as of <u>1/30/19</u> (Date) | Plan of correction implementation status as of <u>1/30/19</u> (Date) |
| The above plan of correction was approved by <u>A.A.A</u> (Initials) | <input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented – Adequate Progress <input type="checkbox"/> Partially Implemented – Inadequate Progress <input type="checkbox"/> Not Implemented |

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

Regulation 2800.224(a) - Initial assessment

(1) The administrator, administrator designee, or LPN, under the supervision of an RN, or an RN shall complete the initial assessment.

Violation: Resident #1, admitted on 07/18/2018, had her Initial assessment done by staff member A, who is a support plan coordinator, not an administrator nor an LPN/RN.

Plan of Correction:

The Support Plan Coordinator is designated to complete the Initial Assessment. The Initial Assessment for Resident #1 was reviewed and the RN signature is present under certification and was signed the same day the Initial Assessment was completed. (Please see attachment #1, page 2, question 12).

A full house audit will be completed by January 31, 2019 of all Initial Assessments to ensure an RN has reviewed, approved, and signed/co-signed all Initial Assessments.

Staff will be educated on the requirement for LPNs that are reviewing and signing the completed Initial Assessment, that the supervising RN must co-sign the document.

The Director of Assisted Living will audit Initial Assessments monthly to ensure the Initial Assessment has been reviewed, approved and signed according to regulation. Results of this review will be reported by the Director of Assisted Living/designee monthly to the QAPI Committee for 12 months.

Printed Name and Title of Legal Entity Representative (Required on all pages)

Signature of Legal Entity Representative (Required on all pages)

Date

Kathleen Brusco RN Director of Assisted Living
Kathleen Brusco
1/14/19

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LICENSING INSPECTION SUMMARY

Assisted Living Residences – 55 Pa.Code § 2800

Regulation 2800.227(b) - A residence may use its own support plan form if it includes the same information as the Department's support plan form. An LPN, under the supervision of an RN, shall review and approve the final support plan.

Violation: Resident #4, admitted on 09/8/2016, had her annual support plan completed on 07/28/2018 by staff member A and reviewed by staff B, who is an LPN. There is no indication that staff B was under the supervision of an RN.

Plan of Correction:

The Support Plan for Resident #4 was reviewed and co-signed by an RN. (Please see attachment #1, page 2, question 12).

A full house audit will be completed by January 31, 2019 of all Support Plans to ensure an RN has reviewed, approved, and signed/co-signed all Annual Support Plans.

Staff will be educated on the requirement for an LPN who is reviewing and signing an Annual Support Plan, that the supervising RN must co-sign the Plan.

The Director of Assisted Living will conduct monthly audits of all Annual Support Plans to ensure they have been properly reviewed, approved and that needed signatures per regulation are present. Results of this review will be reported by the Director of Assisted Living to the QAPI Committee monthly for 12 months.

Printed Name and Title of Legal Entity Representative (Required on all pages)
Kathleen Busco RN, Director of Assisted Living
Signature of Legal Entity Representative (Required on all pages) *Kathleen Busco* Date *1/14/19*

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