



**Sent via e-mail jneely@actslife.org
Sent via e-mail kgildein@actslife.org
August 7, 2020**

Mr. Jeremy Neely
Vice President, Northeast Region
Acts Retirement-Life Communities, Inc.
1936 West Point Pike
Lansdale, Pennsylvania 19446

RE: Oakbridge Terrace at Southampton Estates
238 Street Road
Southampton, Pennsylvania 18966
License #: 138870

Dear Mr. Neely:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on November 14, 2019 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

Claire Mendez

Claire Mendez
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: OAKBRIDGE TERRACE AT SOUTHAMPTON ESTATES

License Number: 13887

Address: 238 STREET ROAD, SOUTHAMPTON, PA 18966

County: BUCKS

Region: SOUTHEAST

Administrator

Name: Kate Gildein

Phone: 2153640500

Email: KGILDEIN@ACTSLIFE.ORG

Legal Entity

Name: ACTS RETIREMENT LIFE COMMUNITIES INC

Address: 375 MORRIS ROAD, WEST POINT, PA, 19486

Certificate(s) of Occupancy

Type: 1-2

Date: 10/27/2009

Issued By: Southampton Township

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 46

Waking Staff: 35

Inspection

Type: Full

BHA Docket #:

Notice: Unannounced

Reason: Renewal

Inspection Dates and Department Representative

11/14/2019 - On-Site: Denise Gillespie, Sabrina Freeman

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 38

Residents Served: 32

Special Care Unit

In Home: Yes

Area: SCU

Capacity: 14

Residents Served: 14

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 0

60 Years of Age or Older: 32

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 14

Have Physical Disability: 0

25b Contract signatures and renewal

Requirements

2800.

25b. The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees. The contract must run month-to-month with automatic renewal unless terminated by the resident with 14 days notice or by the residence with 30 days notice in accordance with § 2800.228 (relating to transfer and discharge).

Description of Violation

Resident # 1's contract dated 5/21/19 was not signed by the resident. The home did not note if the resident was unable to or refused to sign the contract.

Plan of Correction (POC)

(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

Preparation and/or execution of this plan of correction does not constitute admission or agreement by the providers of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared solely as a matter of compliance with federal and state law.

Resident #1's contract dated 5/21/19 was not signed by the resident. The resident refused to sign the contract. The contract was signed by the Power of Attorney for the resident on 5/20/2019. A late entry was placed in the resident's record stating she refused to sign the contract dated 5/21/2019.

The social services coordinator and support plan coordinator were educated on 11/27/19 on the importance of residents needing to sign the contract and the need for documentation if the resident refuses to sign the contract.

Resident contracts will be audited to ensure proper signature and documentation. The audit will be completed by 12/31/19 by Director of Assisted Living or designee. Contract signatures will be monitored with new admissions and reported to QA on a quarterly basis.

Legal Entity Representative

Januel Osu
Signature

Januel Osu Executive Director
Printed Name and Title

originally sent 12-28-19
12-31-19
Date

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The above plan of correction is approved as of 2/24/2020 (Date) Plan of correction implementation status as of 8/2/2020 (Date)

Implemented
 Not Implemented

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

41e Signed statement

Requirements

2800.

41.e. A statement signed by the resident and, if applicable, the resident's designated person acknowledging receipt of a copy of the information specified in subsection (d), or documentation of efforts made to obtain signature, shall be kept in the resident's record.

Description of Violation

Resident # 1's record did not contain a statement signed by the resident acknowledging receipt of a copy of the resident rights and complaint procedures.

Plan of Correction (POC)

(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

Resident #1's contract dated 5/21/19 was not signed by the resident. The resident refused to sign the contract. The resident did receive a copy of resident rights and complaint procedures. The contract was signed by the Power of Attorney for the resident. A late entry will be placed in the resident record stating she refused to sign the contract.

The social services coordinator and support plan coordinator were educated on 11/27/19 on the importance of residents needing to sign the contract and the need for documentation if the resident refuses to sign the contract.

Resident Rights and complaint procedure distribution will be audited to ensure proper signature and documentation. The audit will be completed by 12/31/19 by Director of Assisted Living or designee. Resident Right and Complaint procedure distribution signatures will be monitored with new admissions and reported to QA on a quarterly basis.

Legal Entity Representative

Jeanne Oles
Signature

Jeanne Oles, E.D.
Printed Name and Title

12-31-19
Date

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88a Floors, walls, ceilings, windows, doors

Requirements

2800.

88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

Resident # 2 was using the telephone in the common area across from resident bedroom 202. Resident # 2 had their oxygen in use and the tubing was attached to the concentrator in bedroom 202. This tubing stretched across the hallway, causing a tripping hazard.

Plan of Correction (POC)

(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, in

At the time Resident #2 was in the common area to use the phone there were staff present around the tubing to mitigate the tripping hazard. The resident was offered assistance to switch to a portable oxygen tank while in the common area. Resident #2 refused the staff assistance and refused to switch to a portable tank.

Resident #2 is being provided education on the importance of using portable oxygen while in the common area. This will be completed by 12/31/19.

Residents on oxygen will be randomly monitored throughout the month to ensure the use of portable oxygen in common areas.

Observations will be recorded and reported to QA quarterly.

clude dates by which the steps will be completed.)

Legal Entity Representative

Jeanne Ostw
Signature

Jeanne Ostw E.D.
Printed Name and Title

12/31/19
Date

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181d Self-administer Storing medication

Requirements

2800.

181.d. If the resident does not need assistance with medication, medication may be stored in a resident's living unit for self-administration. Medications stored in the resident's living unit shall be kept locked in a safe and secure location to protect against contamination, spillage and theft. The residence shall provide a lockable storage unit for this purpose.

Description of Violation

Resident # 3 self-administers medications and stores medications in his/her room. On 11/14/19, at 1:45P.M., there were several unlocked, unattended medications to include all of Resident # 3's medications in resident # 3's bedroom.

Plan of Correction (POC)

(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

Resident #3 self-administers medications. She prefers to keep her apartment door unlocked. This is on her support plan.

Resident #3 is being provided education by 12/31/19 on the importance of keeping her door locked and medication secured.

Staff is being provided education verify Resident #3's door is locked, and medications are secure. This will be completed by 12/31/19.

Checks will be done randomly weekly.

Observations will be recorded and reported to QA quarterly.

Legal Entity Representative

Johanne Ostw
Signature

Johanne Ostw
Printed Name and Title

12-3-19
Date

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191 Resident right to refuse

Requirements

2800.

191. Resident Education - The home shall educate the resident of the right to question or refuse a medication if the resident believes there may be a medication error. Documentation of this resident education shall be kept.

Description of Violation

Resident # 1, admitted 5/21/19, has not been educated to the resident's right to refuse medication if the resident believes that there may be a medication error.

Plan of Correction (POC)

(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

Resident #1's contract dated 5/21/19 was not signed by the resident. The resident refused to sign the contract. The contract was signed by the Power of Attorney for the resident. The resident did receive education on being able question or refuse medication. A late entry in the resident record states resident refused to sign her contract.

The social services coordinator and support plan coordinator were educated on 11/27/19 on the importance of residents needing to sign the contract and the need for documentation if the resident refuses to sign the contract.

Resident contracts will be audited to ensure proper signature and documentation will be completed by 12/31/19 by Director of Assisted Living or designee.

Contract signatures will be monitored with new admissions and reported to QA on a quarterly basis.

Legal Entity Representative

James Orr
Signature

Johanna Oster E.D.
Printed Name and Title

12-31-19
Date

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224c1 Initial SP-30 days prior/adm

Requirements

2800.

224.c.1. An individual requiring services shall have a written preliminary support plan developed within 30 days prior to admission to the residence unless one of the conditions contained in paragraph (2) applies.

Description of Violation

Resident # 4 was admitted on 6/4/19; however, the resident's written preliminary support plan was not completed until 7/2/19.

Plan of Correction (POC)

(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

Resident #4's preliminary support plan was completed. The signature page was not on the chart at the time of the survey. It was located and is currently on the chart.

The social services coordinator and support plan coordinator were educated on 11/27/19 on the importance of completing the preliminary support plan prior to admission with proof of signature.

Resident preliminary support plans will be audited to ensure proper signature and documentation will be completed by 12/31/19 by Director of Assisted Living or designee.

Preliminary support plan completion will be monitored with new admissions and reported to QA on a quarterly basis.

Legal Entity Representative

Jeanne Oskw
Signature

Jeanne Oskw E.D.
Printed Name and Title

12-31-19
Date

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Implemented
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231d No objection statement

Requirements

2800.

231.d. Resident admission to special care unit. Each resident record must have documentation that the resident or potential resident and, when appropriate, the resident's designated person or the resident's family have agreed to the resident's admission or transfer to the special care unit.

Description of Violation

Resident # 1 was admitted to the special care unit on 5/21/19. However, the resident's record does not include documentation that the resident and the resident's designated person or the resident's family have agreed to the resident's admission to the special care unit.

Plan of Correction (POC)

(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

Resident #1's contract dated 5/21/19 was not signed by the resident. The resident refused to sign the contract. The contract was signed by the Power of Attorney for the resident. The resident and Power of Attorney did agree for the resident to be admitted to a special care unit. A late entry was completed in the resident record stating she refused to sign the contract.

The social services coordinator and support plan coordinator was educated on 11/27/19 on the importance of residents needing to sign the contract and the need for documentation if the resident refuses to sign the contract.

Resident contracts will be audited to ensure proper signature and documentation will be completed by 12/31/19 by Director of Assisted Living or designee.

Contract signatures will be monitored with new admissions and reported to QA on a quarterly basis.

Legal Entity Representative

James O'Shea
Signature

James O'Shea E.D.
Printed Name and Title

12-31-19
Date

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