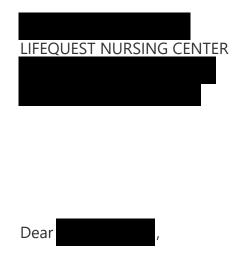
Department of Human Services Bureau of Human Service Licensing

May 25, 2022



RE: THE VILLAGE AT LIFEQUEST 2100 CHERRY BLOSSOM LANE QUAKERTOWN, PA, 18951 LICENSE/COC#: 14496

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/30/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely, Mia Johnson

Enclosure Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Name: THE VILLAGE AT LIFEQUEST	License #: 144	496 License Expiration: 11/07/2022						
Address: 2100 CHERRY BLOSSOM LANE, C	Address: 2100 CHERRY BLOSSOM LANE, QUAKERTOWN, PA 18951							
County: BUCKS	Region: SOUTHEAST							
Administrator								
Name:	Phone: 2674242096 Ema	ail:						
Legal Entity								
Name: LIFEQUEST NURSING CENTER								
Address								
Phone: 2674242096 Email:								
Certificate(s) of Occupancy								
Туре: <i>I-2</i>	Date: 10/22/2019	Issued By: Milford Township						
Staffing Hours								
Resident Support Staff: 0	Total Daily Staff: 101	Waking Staff: 76						
Inspection Information								
Type: Partial Notice: Ur	nannounced BHA Docket #	ŧ:						
Reason: Complaint	Exit Conferen	ce Date: 03/30/2022						
Inspection Dates and Department Rep	resentative							
03/30/2022 - On-Site:								
Decident Demographic Data as of lass	ection Dates							
Resident Demographic Data as of Insp								
General Information								
	Residents S	Served: 75						
General Information		Served: 75						
General Information License Capacity: 141		Gerved: 75 Residents Served:						
General InformationLicense Capacity: 141Special Care UnitIn Home: NoArea:Hospice	Residents S							
General InformationLicense Capacity: 141Special Care UnitIn Home: NoArea:HospiceCurrent Residents: 1	Residents S							
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General Information License Capacity: 141 Special Care Unit In Home: No Area: Hospice Current Residents: 1 Number of Residents Who: Receive Supplemental Security Inco	Residents S Capacity: me: 0 Are 60 Year	Residents Served: rs of Age or Older: <i>70</i>						
General Information License Capacity: 141 Special Care Unit In Home: No Area: Hospice Current Residents: 1 Number of Residents Who: Receive Supplemental Security Inco Diagnosed with Mental Illness: 0	Residents S Capacity: me: 0 Are 60 Year Diagnosed	Residents Served: rs of Age or Older: 70 with Intellectual Disability: 0						
General Information License Capacity: 141 Special Care Unit In Home: No Area: Hospice Current Residents: 1 Number of Residents Who: Receive Supplemental Security Inco	Residents S Capacity: me: 0 Are 60 Year Diagnosed	Residents Served: rs of Age or Older: <i>70</i>						
General Information License Capacity: 141 Special Care Unit In Home: No Area: Hospice Current Residents: 1 Number of Residents Who: Receive Supplemental Security Inco Diagnosed with Mental Illness: 0	Residents S Capacity: me: 0 Are 60 Year Diagnosed	Residents Served: rs of Age or Older: 70 with Intellectual Disability: 0						
General Information License Capacity: 141 Special Care Unit In Home: No Area: Hospice Current Residents: 1 Number of Residents Who: Receive Supplemental Security Inco Diagnosed with Mental Illness: 0 Have Mobility Need: 26	Residents S Capacity: me: 0 Are 60 Year Diagnosed	Residents Served: rs of Age or Older: 70 with Intellectual Disability: 0						
General Information License Capacity: 141 Special Care Unit In Home: No Area: Hospice Current Residents: 1 Number of Residents Who: Receive Supplemental Security Inco Diagnosed with Mental Illness: 0 Have Mobility Need: 26	Residents S Capacity: me: 0 Are 60 Year Diagnosed	Residents Served: rs of Age or Older: 70 with Intellectual Disability: 0 cal Disability: 1						
General Information License Capacity: 141 Special Care Unit In Home: No Area: Hospice Current Residents: 1 Number of Residents Who: Receive Supplemental Security Inco Diagnosed with Mental Illness: 0 Have Mobility Need: 26 Inspections / Reviews 03/30/2022 - Partial	Residents S Capacity: me: 0 Are 60 Year Diagnosed Have Physi	Residents Served: rs of Age or Older: 70 with Intellectual Disability: 0 cal Disability: 1						

16c Incident reporting

1. Requirements

2800.

16.c. The residence shall report the incident or condition to the Department's assisted living residence office or the assisted living residence complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2800.15 (relating to abuse reporting covered by law).

Description of Violation

On	2022, it was	discovered	that resi	dent #	1 had	not been	receiving	the I	medication	prescribed	to treat	a diagnosis
of low	thyroid since arr	riving at the	home o	n	/2022	. The res	dence did	not i	report this i	ncident to t	he Depa	rtment.

On 2022, resident #1 did not receive Lorazepam 1 MG Tab medication; 1 tablet by mouth in AM, 2 tablets orally at bedtime. This is a narcotic medication for which a count should be completed every shift. When asked if the counts were being completed, staff admitted probably not due to staff shortage. This medication error has not been reported to the Department.

Plan of Correction	Accept		
The medication was not given due a pending order confirmation			
The count was not off due to the fact that the medication was not given			
The staff was in-serviced on pending confirmation orders			
The RSD/designee will monitor the pending confirmation orders daily			

Completion Date: 06/08/2022

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Documentation is attached

60a Staffing/support plan needs

1. Requirements

2800.

60.a. Staffing shall be provided to meet the needs of the residents as specified in the resident's assessment and support plan. Residence staff or service providers who provide services to the residents in the residence shall meet the applicable professional licensure requirements.

Description of Violation

Based on interviews with residents and staff on 03/30/2022, staffing levels are insufficient to meet the needs of the residents. Some examples provided include long wait times in response to call bells, long wait times while dining, residents have to put their own trash out, medications not being properly administered, medications not being reordered on time, narcotic medications not being properly counted between shifts and residents being told on overnight shifts that there is no one available to administer requested medications.

Plan of Correction

Accept

Implemented

When there is not a nurse in community, the nurse from the nursing center comes over to assist with straight order medications, PRN medications, assessments of a resident if needed, emergencies and any other nursing issue that may be needed.

A daily assignment sheet is completed in advance of the date of shifts

The daily assignment sheets are reviewed by the administrator or designee daily, prior to the day of the shifts for regulatory/actual hours

The administrator and/or designee will work on filling any empty shifts on the daily assignment sheet If there is an issue filling the shift, ancillary staff that completed the direct care staff test and/or medication administration class in conjunction with the mandatory training will assist the nursing staff on the floor. **Completion Date:** 06/08/2022

Document Submission

Implemented

I cannot submit the POC without writing in the space

185b Medication procedures

1. Requirements

2800.

185.b. At a minimum, the procedures must include:

- 1. Documentation of the receipt of controlled substances and prescription medications.
- 2. A process to investigate and account for missing medications and medication errors.
- 3. Limited access to medication storage areas.
- 4. Documentation of the administration of prescription medications, OTC medications and CAM for residents who receive medication administration services or assistance with self-administration. This requirement does not apply to a resident who self-administers medication without the assistance of a staff person and stores the medication in his living unit.

Description of Violation

The residence's procedures for the safe use of medications and medical equipment include documentation of the receipt of controlled substances and prescription medications, a process to investigate and account for missing medications and medication errors, limited access to medication storage areas, documentation of the administration of prescription medications, OTC medications and CAM for residents who receive medication administration services or assistance with self-administration. This requirement does not apply to a resident who self-administers medication without the assistance of a staff person and stores the medication in **medication** unit.

However, resident #1's "Individual Narcotic Record" shows that the resident was administered Lorazepam-1 MG Tab in the following doses and times:

- 01/27/22 0600 hrs 1 tab 11 tabs remaining
- 01/27/22 2130 hrs 2 tabs 9 tabs remaining
- 01/28/22 0600 hrs 1 tab 8 tabs remaining
- 01/28/22 2130 hrs 2 tabs 6 tabs remaining
- 01/30/22 0600 hrs 1 tab 5 tabs remaining
- 01/30/22 2100 hrs 2 tabs 3 tabs remaining
- 01/31/22 0951 hrs 1 tab 2 tabs remaining
- 01/31/22 2100 hrs 2 tabs 0 tabs remaining

This information is not logged on the resident's "Medication Administration Record" (MAR) and it also shows the resident did not receive the prescribed medication on 01/29/22.

Plan of Correction

Accept

State reportable completed

Doctor made aware, resident meeting took place

The resident did not receive the medication on 1/29/22 due to an order pending confirmation. The time was changed from 9am to 6am, the dosage was also changed.

The staff will be in-serviced on contacting the appropriate people if an order is pending confirmation. Ongoing, The RSD/designee will complete MAR audits weekly

185b Medication procedures (continued)

Document Submission

The documentation is attached

187d Follow prescriber's orders

1. Requirements

2800.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

On 2022, it was discovered that resident #1 had not been receiving the medication prescribed to treat a diagnosis of low thyroid since arriving at the home on 2022.

On 2022, resident #1 did not receive Lorazepam 1 MG Tab medication; 1 tablet by mouth in AM, 2 tablets orally at bedtime. This is a narcotic medication for which a count should be completed every shift.

When staff was asked why these errors were not caught sooner, the reply was "not enough staff".

Plan of Correction

Accept

Implemented

When there is not a nurse in community, the nurse from the nursing center comes over to assist with straight order medications, PRN medications, assessments of a resident if needed, emergencies and any other nursing issue that may be needed.

A daily assignment sheet is completed in advance of the date of shifts

The daily assignment sheets are reviewed by the administrator or designee daily, prior to the day of the shifts for regulatory/actual hours

The administrator and/or designee will work on filling any empty shifts on the daily assignment sheet If there is an issue filling the shift, ancillary staff that completed the direct care staff test and/or medication administration class in conjunction with the mandatory training will assist the nursing staff on the floor.

Completion Date: 06/08/2022

Document Submission

220b Assisted living services

1. Requirements

2800.

220.b. Assisted living services. The residence shall, at a minimum, provide the following services:

- 1. Nutritious meals and snacks in accordance with § § 2800.161 and 2800.162 (relating to nutritional adequacy; and meals).
- 2. Laundry services in accordance with § 2800.105 (relating to laundry).
- 3. A daily program of social and recreational activities in accordance with § 2800.221 (relating to activities program).
- 4. Assistance with performing ADLs and IADLs in accordance with § § 2800.23 and 2800.24 (relating to activities; and personal hygiene).
- 5. Assistance with self-administration of medication or medication administration as indicated in the resident's assessment and support plan in accordance with § § 2800.181 and 2800.182 (relating to self-administration; and medication administration).
- 6. Housekeeping services essential for the health, safety and comfort of the resident based upon the resident's needs and preferences.
- 7. Transportation in accordance with § 2800.171 (relating to transportation).

Implemented

220b Assisted living services (continued)

- 8. Financial management in accordance with § 2800.20 (relating to financial management).
- 9. 24-hour supervision, monitoring and emergency response.
- 10. Activities and socialization.
- 11. Basic cognitive support services as defined in § 2800.4 (relating to definitions).

Description of Violation

The residence is not providing the following required assisted living services; Assistance with self-administration of medication or medication administration as indicated in the resident's assessment and support plan in accordance with § § 2800.181 and 2800.182 (relating to self-administration; and medication administration), housekeeping services essential for the health, safety and comfort of the resident based upon the resident's needs and preferences.

Plan of Correction

Accept

The resident did not receive the medication on 1/29/22 due to an order pending confirmation. The time was changed from 9am to 6am, the dosage was also changed.

The staff will be in-serviced on contacting the appropriate people if an order is pending confirmation. Ongoing, The RSD/designee will complete MAR audits weekly

Completion Date: 06/08/2022

Document Submission

Implemented