

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

July 6, 2023

[REDACTED], COO
SNH PENN TENANT LLC

RE: EXTON SENIOR LIVING
600 NORTH POTTSTOWN PIKE
EXTON, PA, 19341
LICENSE/COC#: 14510

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/27/2023 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,

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: *EXTON SENIOR LIVING* License #: *14510* License Expiration: *01/01/2024*
 Address: *600 NORTH POTTSTOWN PIKE, EXTON, PA 19341*
 County: *CHESTER* Region: *SOUTHEAST*

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: *SNH PENN TENANT LLC*
 Address: [Redacted]
 Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *12/14/1998* Issued By: *Uwchlan Township*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *74* Waking Staff: *56*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: *02/27/2023*

Inspection Dates and Department Representative

02/27/2023 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *100* Residents Served: *53*

Secured Dementia Care Unit
 In Home: *Yes* Area: *Bridges* Capacity: *32* Residents Served: *16*

Hospice
 Current Residents: *2*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *52*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *21* Have Physical Disability: *0*

Inspections / Reviews

02/27/2023 Partial
 Lead Inspector: [Redacted] Follow-Up Type: *POC Submission* Follow-Up Date: *03/24/2023*

03/24/2023 - POC Submission
 Submitted By: [Redacted] Date Submitted: *04/28/2023*
 Reviewer: [Redacted] Follow-Up Type: *POC Submission* Follow-Up Date: *03/29/2023*

Inspections / Reviews *(continued)*

04/04/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/28/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 04/30/2023

07/06/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/28/2023

Reviewer: [REDACTED]

Follow Up Type: Not Required

183d - Prescription Current

1. Requirements

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

On [redacted] prescribed for Resident #1, was in the home's medication cart; however, the medication was discontinued on [redacted].

Plan of Correction

Accept ([redacted] - 04/04/2023)

Resident Wellness Director will provide in-service re-education on the requirements of 2600.183.d. to all LPN's & Medication

Associates. Documentation of training will be maintained. Completed 3/8/2023 See attached.

RWD or designated med associate to audit medication carts weekly. Cart audits began March 15, 2023 and will continue weekly for 90 days and monthly thereafter.

Licensee's Proposed Overall Completion Date: 03/28/2023

Implemented ([redacted] - 07/06/2023)

185a - Implement Storage Procedures

2. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident #1 is prescribed [redacted] Packet as needed. On [redacted] this medication was not available in the home.

Plan of Correction

Accept ([redacted] - 04/04/2023)

Resident Wellness Director will provide in-service re-education on the requirements of 2600.185.a. to all LPN's & Medication

Associates. Documentation of training will be maintained. Completed 3/8/2023 See attached.

RWD or designated med associate to audit medication carts weekly. Cart audits began March 15, 2023 and will continue weekly for 90 days and monthly thereafter.

Licensee's Proposed Overall Completion Date: 03/28/2023

Implemented ([redacted] - 07/06/2023)

185b - Medication Procedures

3. Requirements

2600.

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

- 2. A process to investigate and account for missing medications and medication errors.

Description of Violation

The home's procedures for the safe use of medications and medical equipment do not include a process to investigate

185b Medication Procedures (continued)

and account for missing medications and medication errors. On [REDACTED] resident #2's medication [REDACTED] tab [REDACTED] take one tablet as needed for pain, had a discrepancy of 4 narcotic pills missing. The home completed an investigation in which determined that staff member A was stealing the medication and not administering the medication to the resident as documented. Resident #2 was interviewed and stated that [REDACTED] is not taking any [REDACTED] for pain. Staff member A was interviewed and suspended. The home did not notify the authorities. The home did not retain the narcotic control record for resident #2's [REDACTED] for the month of November and December.

Plan of Correction

Accept [REDACTED] - 04/04/2023)

Staff member A was terminated following the suspension.

Resident Wellness Director will provide in service re education on the requirements of 2600.185.b. to all LPN's & Medication

Associates. Documentation of training will be maintained. Completed 3/8/2023. Department heads will receive in service as well by March 31, 2023

See attached.

RWD and LPN will monitor narcotic counts and sign off daily beginning April 3, 2023. Beginning April 28th we will be in a electronic narcotic counting program with Polaris for the safe retention of records

Licensee's Proposed Overall Completion Date: 04/17/2023

Implemented [REDACTED] - 07/06/2023)

187a - Medication Record**4. Requirements**

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

3. Name of medication.

8. Frequency of administration.

12. Diagnosis or purpose for the medication, including pro re nata (PRN).

Description of Violation

Resident #1 is prescribed [REDACTED]. However, resident's February 2023 medication administration record (MAR) does not indicate the name of medication, and frequency of administration.

Resident #1 is prescribed [REDACTED]. The MAR does not indicate a diagnosis or purpose for these medications.

Resident #3 is prescribed [REDACTED]. However, resident's February 2023 medication administration record does not indicate the name of medication, and frequency of administration.

Resident #3 is prescribed [REDACTED]. The MAR does not indicate a diagnosis or purpose for these medications.

Plan of Correction

Accept [REDACTED] 04/04/2023)

Resident Wellness Director will provide in service re education on the requirements of 2600.187.a. to all LPN's & Medication

187a - Medication Record (continued)

Associates. Documentation of training will be maintained. Completed 3/8/2023 See attached.

RWD or designated med associate to audit medication carts weekly. Cart audits began March 15, 2023 and will continue weekly for 90 days and monthly thereafter.

Licensee's Proposed Overall Completion Date: 03/28/2023

Implemented (████) - 07/06/2023)

187d - Follow Prescriber's Orders

5. Requirements

2600.
187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #1 is prescribed ██████████. However, resident #1 was administered ██████████ ██████████ on February 1st through February 8th at 9am, 1pm and at 5pm.

Plan of Correction

Accept (████) - 04/04/2023)

Resident Wellness Director will provide in-service re-education on the requirements of 2600.187.d. to all LPN's & Medication

Associates. Documentation of training will be maintained. Completed 3/8/2023 See attached.

RWD or designated med associate to audit medication carts weekly. Cart audits began March 15, 2023 and will continue weekly for 90 days and monthly thereafter.

Licensee's Proposed Overall Completion Date: 03/28/2023

Implemented (████) - 07/06/2023)

225a - Assessment 15 Days

6. Requirements

2600.
225.a. A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

Description of Violation

Resident #2 was admitted on ██████████; however, the resident's assessment was not completed until ██████████.

Plan of Correction

Accept (████) - 04/04/2023)

This resident was admitted 8 days prior to a transition to a different company taking over Exton Senior Living. Our process is different than the prior company. Our process involves the RWD and CRD documenting the assessment at move in (within 24 hours) as well as a tracker in our software to flag original and future assessments. We do quarterly assessments.

Veronica Graham (Wellness & Operations Specialist - Eastern Region) will audit assessments and dates for entire community on April 6th. In addition to RWD's weekly oversight of assessments, Veronica Graham will continue bi-weekly audits ongoing

225a - Assessment 15 Days (continued)

Licensee's Proposed Overall Completion Date: 04/14/2023

Implemented ([REDACTED]) - 07/06/2023)

227h - Support Plan Refuse Sign

7. Requirements

2600.

227.h. If a resident or designated person is unable or chooses not to sign the support plan, a notation of inability or refusal to sign shall be documented.

Description of Violation

Resident #2 participated in the development of his/her support plan on [REDACTED]. The resident was unable to sign the support plan. The home did not make a notation regarding the resident's inability to sign.

Plan of Correction

Accept ([REDACTED]) - 04/04/2023)

See attached signed RASP by Resident.

RWD or designated med associate to audit all support plans for signature or notation if unable to sign. RWD will assure signatures or proper designation of inability or refusal to sign documents. All RASP will be audited by RWD by April 14th, 2023

Veronica Graham (Wellness & Operations Specialist - Eastern Region) will audit DME and RASP dates for entire community on April 6th. In addition to RWD's weekly oversight. Veronica Graham will continue bi-weekly audits ongoing

Licensee's Proposed Overall Completion Date: 04/14/2023

Implemented ([REDACTED]) 07/06/2023)