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

May 3, 2023

ACTS RETIREMENT LIFE COMMUNITIES INC

RE: OAKBRIDGE TERRACE AT GWYNEDD

ESTATES

301 NORRISTOWN ROAD

AMBLER, PA, 19002 LICENSE/COC#: 13897

Dear

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/17/2023 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

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Facility Information

Name: OAKBRIDGE TERRACE AT GWYNEDD ESTATES Licen e #: 13897 Licen e Expiration: 05/31/2023

Address: 301 NORRISTOWN ROAD, AMBLER, PA 19002

County: MONTGOMERY Region: SOUTHEAST

Administrator

Name Phone: Email:

Legal Entity

Name: ACTS RETIREMENT-LIFE COMMUNITIES INC

Address:

Phone: Email

Certificate(s) of Occupancy

Type: Other Date: 03/28/2006 I ued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 17 Waking Staff: 13

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:

Reason: Renewal Exit Conference Date: 03/17/2023

Inspection Dates and Department Representative

03/17/2023 On Site

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 20 Residents Served: 17

Special Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 17

Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0

Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

03/17/2023 - Full

Lead Inspector: Follow-Up Type: POC Submission Follow-Up Date: 04/09/2023

04/04/2023 - POC Submission

Submitted By: Date Submitted: 05/03/2023

Reviewer: Follow-Up Type: POC Submission Follow-Up Date: 04/09/2023

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Inspections / Reviews (continued)

O4/05/2023 - POC Submission

Submitted By Date Submitted: 05/03/2023

Reviewer: Follow-Up Type: Document Submission Follow-Up Date: 05/05/2023

O5/03/2023 - Document Submission

Submitted By: Date Submitted: 05/03/2023

Reviewer: Follow-Up Type: Not Required

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96b First aid kit-Location

1. Requirements

2800.

96.b. Staff persons shall know the location of the first aid kit.

Description of Violation

Staff person A did not know the location of the first aid kit.

Plan of Correction

Accept (- 04/05/2023)

Team Members will be trained by the DAL on the location of the first aid kit during their new-hire training. A sign has been posted by the DAL in the Nursing and Med Tech Office area on 3/30/2023, so Team Members know the location of the first aid kit. The location of the first aid kit has been added to the new-hire training log and will be signed off by both the new Team Member and DAL. The new hire log was updated on 3/30/2023 by the DAL and will begin with the next new hire.

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

- 05/03/2023)

183d Current medications

2. Requirements

2800.

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

Description of Violation

On 03/17/2023, an opened bottle of solution was in the medication cart with an open date of 12/28/2022. According to the manufacturer's instructions, the content should be discarded 4 weeks after being opened.

Plan of Correction Accept - 04/05/2023)

The bottle of eye drops was removed from the med cart on 3/17/2023 by the DAL and new order was received from the onsite NP and sent to the Pharmacy. Team Members (Nurses and Med Techs) were educated on 3/31/2023 to date medications with the opened and discarded date. Team members (Nurses) will keep a log of all meditations that have been ordered and review them daily to ensure that if a medication was ordered that it was received from the pharmacy this started on 3/18/2023. For any medication that was not received team member will call and follow up with the Pharmacy within 2 days of ordering the medication on the reason why the medication has not been delivered this process began on 3/18/2023. DAL will do monthly cart audits starting 4/30/2023 and report finding at quarterly QA meetings X2 (6 months).

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

Implemented (- 05/03/2023)

187b Date/time of med admin

3. Requirements

2800.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

Resident #1 is prescribed twice a day and once a day as needed. Resident #1's March medication administration record (MAR) does not include the initials of the staff person who administered it on 2023 at

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187b Date/time of med admin (continued)

12:00 AM.

Plan of Correction Accept (CM - 04/05/2023)

was only signed out on the narcotic log on 23. Team Members (Nurses and Med Techs) have been educated on the process of documenting narcotic administration on both the narcotic log and the EMAR by the DAL on 3/31/2023. DAL will audit the EMAR monthly starting 4/30/2023 and report finding at the quarterly QA Meeting x2 96 months).

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

- 05/03/2023)

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