

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

May 23, 2023

[REDACTED], ADMINISTRATOR
LIFEQUEST NURSING CENTER
[REDACTED]

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

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/29/2023, 03/30/2023, 04/11/2023 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,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: THE VILLAGE AT LIFEQUEST License #: 14496 License Expiration: 11/07/2023
 Address: 2100 CHERRY BLOSSOM LANE, QUAKERTOWN, PA 18951
 County: BUCKS Region: SOUTHEAST

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: LIFEQUEST NURSING CENTER
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: Total Daily Staff: 127 Waking Staff: 95

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Incident Exit Conference Date: 03/30/2023

Inspection Dates and Representative

03/29/2023 - On-Site: [REDACTED]
 03/30/2023 - Off-Site: [REDACTED]
 04/11/2023 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 141 Residents Served: 87

Special Care Unit
 In Home: No Area: Capacity: Residents Served:

Hospice
 Current Residents: 4

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 86
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 40 Have Physical Disability: 0

Inspections / Reviews

03/29/2023 Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 04/27/2023

04/27/2023 - POC Submission

Submitted By: [REDACTED] Date Submitted: 05/19/2023
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 05/02/2023

Inspections / Reviews *(continued)*

05/03/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/19/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 05/31/2023

05/23/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/19/2023

Reviewer: [REDACTED]

Follow Up Type: Not Required

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 or around [REDACTED] Resident #1 reported to staff person A that approximately [REDACTED] or more in cash was missing from the resident's room. The residence did not report this incident to the Department.

Plan of Correction

Accept [REDACTED] - 05/03/2023)

1. The resident reported that 20.00 was missing from [REDACTED] room
2. The home did not report to the department immediately because the money was determined not to have been missing
3. The incident was reported at a later date
4. An investigation was completed
5. Moving forward the home with report any report of missing valuables before doing the investigation
6. A training was done on reportable incidents by [REDACTED] on 3/31/23
7. All department heads that serve as Manager on Duty were included in the training. Administrator, Sales Director, Activities Director, Director of Resident Care, Resident Care Coordinator
8. Moving forward an audit will be done monthly by the Compliance Manager to ensure any reportable are handled with the regulation. Copy of the audit are attached
9. Audits will begin on May 1, 2023 and be ongoing

Licensee's Proposed Overall Completion Date: 06/01/2023

Implemented [REDACTED] - 05/22/2023)

16e Resident incident notice

2. Requirements

2800.

16.e. If the residence's final report validates the occurrence of the alleged incident or condition, the affected resident and other residents who could potentially be harmed or his designated person shall also be informed immediately following the conclusion of the investigation.

Description of Violation

On [REDACTED], the residence submitted a final incident report validating the occurrence of financial exploitation of residents, affecting Resident 1 and other residents in the residence. As of [REDACTED] the residence had not informed the other potential victims or their designated persons.

Plan of Correction

Accept [REDACTED] - 05/03/2023)

1. A letter was sent out to all families and residents on 3/3/23, including any potential victims.
2. At resident council, 4/11/23 the Administrator went over the letter and how to keep belongings and personal information safe. That we provide lock boxes and locks for drawers or cabinets
3. A training is scheduled with the residents for May 10th at the next resident council. A staff member who was a police officer is giving the training on how to protect yourself and your valuables.
4. Moving forward families and residents will be notified immediately on any financial exploitation by the administrator or designee
5. The Compliance Manager will doing a reportable audit and will look to ensure these things are complete
6. The audit will begin on May 1, 2023. It will be completed monthly and be ongoing for one year

16e Resident incident notice (continued)

Licensee's Proposed Overall Completion Date: 06/01/2023

Implemented [REDACTED] - 05/22/2023)

42b Abuse/Neglect

3. Requirements

2800.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

The residence neglected to notify residents of potential harm or theft after being made aware that several residents experienced financial exploitation by staff person B at the residence on or around February [REDACTED]. The residence initially became aware of the financial exploitation by staff person B on [REDACTED].

On [REDACTED], Resident 1 noticed that two checks for large amounts had been withdrawn from their account. One for [REDACTED] and one for [REDACTED], both checks having been deposited on [REDACTED] by staff person B. Resident 1 and their designated person were upset to learn that the residence was aware of the potential for theft and that the residence failed to notify them. Resident 1 reported that they would have reviewed their accounts much sooner and would have been able to contact their bank for stop payments on their checks.

Plan of Correction

Accept [REDACTED] - 05/03/2023)

1. A letter was written and sent out to families and residents
2. The letter and the missing checks were discussed at resident council on April 11, 2023 by the Administrator. We talked about the lock boxes, having locks installed on drawers by us and keeping all personal information safe, such as social security cards, insurance cards, etc.... A copy of the letter is attached
3. On May 10, 2023 at the resident council meeting a former police officer is going to do a training with the residents on keeping belongings and person belongings safe and secure
4. Moving forward families and residents will be notified of any financial exploitation immediately by the administrator or designee
5. A training was previously planned June 28th, 2023 for all staff to be given by the administrator.
6. A review of the resident rights/abuse/neglect including financial exploitation will be done before the training with the nursing staff. It will begin 5/5/23 and be given by the Compliance Manager

Licensee's Proposed Overall Completion Date: 06/01/2023

Implemented [REDACTED] 05/23/2023)