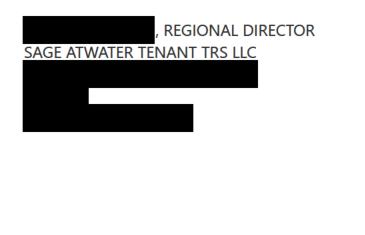
Department of Human Services Bureau of Human Service Licensing LICENSING INSPECTION SUMMARY PUBLIC

November 14, 2023



RE: ECHO LAKE 900 NORTH ATWATER DRIVE MALVERN, PA, 19355 LICENSE/COC#: 14713

Dear

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/11/2023 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,

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information Name: ECHO LAKE License #: 14713 License Expiration: 10/20/2023 Address: 900 NORTH ATWATER DRIVE, MALVERN, PA 19355 County: CHESTER Region: SOUTHEAST Administrator Name: Phone: Email: Legal Entity Name: SAGE ATWATER TENANT TRS LLC Address: Email: Phone: Certificate(s) of Occupancy Issued By: Tredyffrin Township Date: 09/23/2020 **Type**: *I*-1 Staffing Hours Resident Support Staff: 0 Total Daily Staff: 134 Waking Staff: 101 Inspection Information Type: Partial Notice: Unannounced BHA Docket #: Reason: Monitoring Exit Conference Date: 09/11/2023 Inspection Dates and Department Representative 09/11/2023 - On-Site: **Resident Demographic Data as of Inspection Dates** General Information License Capacity: 104 **Residents Served:** 71 Special Care Unit In Home: Yes Area: Connections Capacity: 38 Residents Served: 26 Hospice Current Residents: NM Number of Residents Who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 68 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0 Have Mobility Need: 63 Have Physical Disability: 0 Inspections / Reviews 09/11/2023 Partial Lead Inspector: Follow-Up Type: POC Submission Follow-Up Date: 10/02/2023 09/27/2023 - POC Submission Submitted By: Date Submitted: 10/16/2023 Reviewer: Follow-Up Type: Document Submission Follow-Up Date: 10/27/2023

ECHO LAKE

14713

Inspections / Reviews (continued)	
11/14/2023 Document Submission	
Submitted By:	Date Submitted: 10/16/2023
Reviewer:	Follow Up Type: Not Required

14713

- 09/27/2023)

- 11/14/2023)

183d Current medications

1. 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 *medication*, earwax removal drops prescribed for Resident 1, were in the residence's medication cart; however, the medication was discontinued on **the second second**.

Plan of Correction

POC: All Nurses and Medication Technicians were re-educated on 9/25/23, by the Health & Wellness Director, regarding Regulation 2800.183d ensuring only current prescription, OTC and CAM medications are in the medication carts in addition to all medications that have been discontinued by the prescriber have been removed from the medication cart.

Beginning 9/25/23, HWD or RSC will audit 5 Resident MARs and compare to the medications in the medication cart, from each of the 3 medication carts weekly x 2 weeks, then bi-weekly x2 months to ensure that only medications prescribed by the PCP are in the medication cart, in addition to ensure all medications that have been discontinued by the prescriber have been removed from the medication cart.

HWD is responsible for sustained compliance. Results will be shared at monthly QA.

Licensee's Proposed Overall Completion Date: 10/31/2023

Accept (

184b - Labeling OTC/CAM

2. Requirements

2800.

184.b. If the OTC medications and CAM belong to the resident, they shall be identified with the resident's name.

On	а	bottle
	, u	Donne

belonging to Resident 2 was in the medication cart and

Implemented (

was not labeled with the resident's name.

of

Plan of Correction

Accept - 09/27/2023)

POC: All Nurses and Medication Technicians were re-educated on 9/25/23, by the Health & Wellness Director, regarding Regulation 2800.184b ensuring all medications, including OTC and CAM are labeled with the Residents name and apartment number.

Beginning 9/25/23, HWD or RSC will audit 5 Resident MARs and compare to the medications in the medication cart, from each of the 3 medication carts weekly x 2 weeks, then bi-weekly x2 months to ensure all OTC and CAM medication is properly labeled with the Resident's name and apartment number.

HWD is responsible for sustained compliance. Results will be shared at monthly QA.

Licensee's Proposed Overall Completion Date: 10/31/2023

187d Follow prescriber's orders

3. Requirements

2800.

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

Description of Violation

Resident 1 is prescribed		, instill 5 drops in both ears	s two times a day	for ear wax remov	al for 4
days starting on	. However, the medicat	tion was not administered t	o the resident on		and

Repeat Violation Date: 8/25/22

Plan of Correction	Accept (- 09/27/2023)
POC: All Nurses and Medication Technicians were re educated on 9/25/23 regarding	Regulation 2800	0.187d ensuring
residence follows the directions of the prescriber, by the Health and Wellness Director		

Beginning 9/25/23, HWD or RSC will audit 5 MARs from each of the 3 medication carts weekly x 2 weeks, then bi weekly x2 months to ensure all medication is administered and signed off as ordered by the PCP.

HWD is responsible for sustained compliance. Results will be shared at monthly QA.

Licensee's Proposed Overall Completion Date: 10/31/2023

09/11/2023

- 11/14/2023)

Implemented (

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- 11/14/2023)