

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

May 21, 2024

[REDACTED]
DRI HEARTIS YARDLEY LLC
[REDACTED]
[REDACTED]

RE: HEARTIS YARDLEY
255 OXFORD VALLEY ROAD
YARDLEY, PA, 19067
LICENSE/COC#: 14772

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/18/2024, 03/18/2024 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: HEARTIS YARDLEY

License #: 14772

License Expiration: 09/14/2024

Address: 255 OXFORD VALLEY ROAD, YARDLEY, PA 19067

County: BUCKS

Region: SOUTHEAST

Administrator

Name: Gail Pe'ay

Phone: 267-907-7977

Email: YardleyED@ISLLLC.com

Legal Entity

Name: DRI HEARTIS YARDLEY LLC

Address: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Certificate(s) of Occupancy

Type: I-2

Date: 12/01/2020

Issued By: Lower Makefield Township

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 133

Waking Staff: 100

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Incident

Exit Conference Date: 03/18/2024

Inspection Dates and Department Representative

03/18/2024 - On-Site: [REDACTED]

03/18/2024 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 115

Residents Served: 103

Special Care Unit

In Home: Yes

Area: Generations

Capacity: 21

Residents Served: 21

Hospice

Current Residents: 5

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 103

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 30

Have Physical Disability: 0

Inspections / Reviews

03/18/2024 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 04/13/2024

04/18/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/20/2024

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 04/23/2024

Inspections / Reviews (*continued*)

04/19/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/20/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 05/16/2024

05/21/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/20/2024

Reviewer: [REDACTED]

Follow-Up Type: Not Required

69 Dementia training

1. Requirements

2800.

69. Additional Dementia-Specific Training - Administrative staff, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall receive at least 4 hours of dementia-specific training within 30 days of hire and at least 2 hours of dementia-specific training annually thereafter in addition to the training requirements of this chapter.

Description of Violation

Staff Person A, date of hire 12/6/23, received 0 hours of dementia-specific training within 30 days of hire.

Plan of Correction

Accept [REDACTED] - 04/19/2024)

The Additional Dementia-Specific training required within 30 days of hire for Staff Member A was not found in the employee file during the inspection on 3/18/24.

Staff Member A will be re-trained by 4/30/24 on Dementia and Additional Dementia-Specific training by the Generations Program Director/Dementia Practitioner or designee.

In review of the absence of this training requirement the Business Office Director or designee will conduct an audit of employee files to determine if any Dementia-Specific trainings are out of compliance by 5/15/24.

Going forward any staff member found out of compliance will be mandated to attend the next scheduled new hire orientation where Additional Dementia and Dementia-specific training is initially conducted by the Generations Program Director/Dementia Practitioner or designee to satisfy regulation 2800.69. New Hire Orientations are held 2 times a month.

As an ongoing method to prevent non-compliance with Additional Dementia and Dementia-Specific training within 30 days of hire and annually going forward. The ED or designee will review and sign off on all Initial and Annual training record forms indicating all required trainings have been presented, completed, and acknowledged by the employee and the trainer as an ongoing process and to ensure all training documents are on file and present in the employee file.

Proposed Overall Completion Date: 05/15/2024.

Licensee's Proposed Overall Completion Date: 05/15/2024

Implemented [REDACTED] - 05/21/2024)

187d Follow prescriber's orders

2. Requirements

2800.

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

Description of Violation

Resident [REDACTED] is prescribed [REDACTED] once daily. However, Resident [REDACTED] was not administered [REDACTED] from 3/1/24 through 3/8/24.

Resident [REDACTED] is prescribed Healthy Eyes Supervision is ordered to be administered every 12 hours by mouth. Resident [REDACTED] was only administered Healthy Eyes Supervision at 12:00 12:00 A.M. daily 3/1/24 to 3/14/24 and 3/17/24. On 3/15/24 and 3/16/24 the medication was not administered because it was not in the home.

Resident [REDACTED] was prescribed [REDACTED] once daily. Resident [REDACTED] was not administered [REDACTED] 3/1/24 to 3/13/24 at 8:00 P.M. because it was not in the home.

187d Follow prescriber's orders (continued)

Plan of Correction

Accept [REDACTED] - 04/18/2024)

The medication [REDACTED] and the Healthy Eyes Supervision for resident [REDACTED] and the [REDACTED] for resident [REDACTED] were brought into compliance as of 3/18/2024 by ensuring the medications were profiled appropriately and available in the med cart for administration to resident [REDACTED] and resident [REDACTED] as prescribed by the physician. To prevent this from occurring again and ensuring all resident's medication is available and administered as directed by the prescriber. The Resident Care Director, Generations Program Director, Wellness Nurse, Resident Care Coordinator or designee will ensure all medications are profiled correctly in the Eldermark/Medication Administration system upon receiving the order from the prescriber and following the step-by-step processes for linking new medications to the dashboard for proper distribution to residents. The GPD, and the WN will be reeducated on the Medication Profile process in Eldermark by the RCD or designee. Med techs will conduct daily cart audits to ensure compliance with regulation 2800.187d and report any missing medications to the RCD, GPD, WN, RCC or designee immediately. The RCD, GPD, WN, RCC or designee will perform a mar to cart audit 1 time weekly for 1 month beginning 4/15/24 to ensure all medications are present and available for administration to resident as prescribed by the physician. Any medication not available, the RCD, RCC, GPD, WN, or designee will immediately contact the physician and request an order for the medication and profile it in accordance with the medication administration policies. As an ongoing practice the RCD or designee will review the Med Tech audit tool and follow up on any findings for compliance to 2800.187d. The RCD, GPD, WN, RCC, or designee will conduct random cart audits of all four med carts to ensure the med techs are performing the daily cart audit and reporting any issues.

Proposed Overall Completion Date: 05/15/2024

Licensee's Proposed Overall Completion Date: 05/15/2024

Implemented [REDACTED] - 05/21/2024)

190a Completion of course—meds

3. Requirements

2800.

190.a. A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

Description of Violation

Staff person A, who has not successfully completed the Department-approved medications administration course, administered medications to residents to include the following: on 3/6/24, 3/7/24, 3/8/24, 3/9/24, 3/10/24, 3/13/24, and 3/14/24.

Staff person B, who has not successfully completed the Department-approved medications administration course, administered medications to residents to include the following: on 3/16/24 and 3/17/24.

Plan of Correction

Accept [REDACTED] - 04/18/2024)

Staff persons A and B had previously received the medication administration course training from another

190a Completion of course—meds (continued)

department-approved trainer however, the documents were not on file during the time of inspection on 3/18/24. Staff persons A and B were immediately removed from administering medication to residents at that time. As of 3/20/24 the documents that indicate course completion for both staff persons A and B have been placed on file in the Resident Care Directors/RCD office and also placed in the employee's personnel file. To prevent this violation from occurring in the future the RCD will complete a 1-time audit of all med tech files currently employed to ensure all required coursework is on file according to 2800.190a by 4/15/24. Any course work for med techs found out of compliance will be immediately removed from administering medications to residents until they are brought into full compliance with the department-approved medications administration course requirements and regulations 2800.190a. As an ongoing practice for preventing this violation from occurring again. The RCD is currently the Department-Approved Medication Administration Course Train-the-Trainer for the community. Going forward after the RCD concludes each medication administration course, will ensure all required coursework for those trained will have the course completion documents immediately placed on file. These documents will be held in two places. One being the Medication Administration Course Completion Binder maintained within the office of the RCD and the applicable employee's personnel file maintained in the Business Office.

Proposed Overall Completion Date: 04/15/2024

Licensee's Proposed Overall Completion Date: 04/15/2024

Implemented [REDACTED] - 05/21/2024)