



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: June 27, 2017

Martin E. Steinberger
Manager
Abington Senior Care, LLC
1000 Legion Place, Suite 1600
Orlando, Florida 20004

RE: The Terrace at Chestnut Hill
495 East Abington Avenue
Philadelphia, Pennsylvania 19118
License # 141571

Dear Mr. Steinberger:

As a result of the Department of Human Services' licensing inspection on March 8, 2017 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Roslyn Brewer".

Roslyn Brewer
Regional Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report: 14157 - 03/08/2017 - Parker, Shawn
 PCH Name: THE TERRACE AT CHESTNUT HILL

1. REGULATION 55 Pa.Code §2800
 2600.141(b)(1) - A resident shall have a medical evaluation at least annually.

2a. DESCRIPTION OF VIOLATION
 Resident # 1's last DME was completed 09-13-15. There was no DME completed at all in 2016. This exceeds the annual deadline.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

SEE ATTACHED!

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>William Rubin, Executive Director</i>	Date <i>3-31-17</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 4/3/17
 (Date)

The above plan of correction was approved by [Signature]
 (Initials)

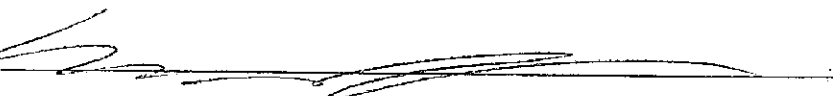
Plan of correction implementation status as of 4/3/17
 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

The Terrace at Chestnut Hill
495 E. Abington Ave.
Philadelphia, PA 19118
215-247-5307

Administrator: Bill Kofron
Inspection Date: March 8, 2017
Regional Licensing Supervisor: Shawn Parker

Regulation	Dates	Plan of Correction
§2600.141(b)(1) A resident shall have a medical evaluation at least annually.	03/2017	Immediate: The Documentation of Medical Evaluation was faxed to the resident's physician to be completed, signed and returned to the community. The physician's office has received the DME. The Wellness Nurse called the physician office on 03/27/2017 to ask for return of the DME. As of 03/30/2017 it has not been received at the community. It was faxed again on 03/30/2017. We will send it to the Southeast Regional Office of DHS upon receipt.
	03/13/2017 – 04/30/2017	Current: In the absence of a Resident Care Director, the Assistant Executive Director is auditing all of the resident medical records to ensure that the DMEs are current and within compliance. Upon completion of the audit, a DME Tracker will be created to assist with maintaining compliance with annual evaluations.
	05/2017 - Ongoing	Ongoing: The Assistant Executive Director and the Resident Care director will continue to update the DME Tracker to include any new admissions and any changes in status resulting in a new DME and new evaluation date. The tracker will be utilized monthly to send the needed DMEs to the physicians for completion.

Administrator Signature: 

Date: 3-31-17

Violation Report: 14157 - 03/08/2017 - Parker, Shawn
 PCH Name: THE TERRACE AT CHESTNUT HILL

1. REGULATION 55 Pa.Code §2600

2600.225(c) - The resident shall have additional assessments as follows:

- (1) Annually.
- (2) If the condition of the resident significantly changes prior to the annual assessment.
- (3) At the request of the Department upon cause to believe that an update is required.

2a. DESCRIPTION OF VIOLATION


The most recent assessment for resident # 1 was 09-16-15. There was no assessment in 2016 exceeding the annual deadline.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

SEE ATTACHED!

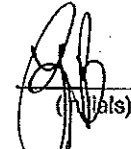
Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) 

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>William R. Ryan, Executive Director</i>	Date 3-31-17
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The above plan of correction is approved as of 4/3/17
 (Date)

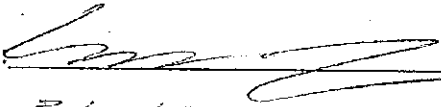
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The Terrace at Chestnut Hill
 495 E. Abington Ave.
 Philadelphia, PA 19118
 215-247-5307
 Administrator: Bill Kofron
 Inspection Date: March 8, 2017
 Regional Licensing Supervisor: Shawn Parker

Regulation	Dates	Plan of Correction
<p>§2600.225(c)</p> <p>A resident shall have additional assessments as follows: (1) Annually, (2) If the condition of the resident significantly changes prior to the annual assessment, (3) at the request of the Department upon cause to believe that an update is required.</p>	<p>03/13/2017</p> <p>03/13/2017 – 04/30/2017</p> <p>05/2017 - Ongoing</p>	<p>Immediate: The Assistant Executive Director completed a new Resident Assessment and Support Plan (RASP) for the resident to bring it into compliance. Please see attached. A care conference is being scheduled with his family to review.</p> <p>Current: In the absence of a Resident Care Director, the Assistant Executive Director is auditing all of the resident medical records to ensure that the RASPs are current and within compliance. Upon completion of the audit, a RASP Tracker will be created to assist with maintaining annual compliance.</p> <p>Ongoing: The Assistant Executive Director and the Resident Care director will continue to update the RASP Tracker to include any new admissions and any changes in status resulting in the development of a new RASP. The tracker will be utilized monthly to complete any RASPs requiring annual updates.</p>

Administrator Signature: 

Date: 3-31-17