



pennsylvania
DEPARTMENT OF HUMAN SERVICES

FEB 13 2019

Ms. Cheryle Eustace
Administrator
ACTS Retirement – Life Communities, Inc.
375 Morris Road
West Point, Pennsylvania 19126

RE: Oakbridge Terrace at Normandy Farm Estates
9000 Twin Silo Drive
Blue Bell, Pennsylvania 19422
License #:138980

Dear Ms. Eustace:

As a result of the Department's Bureau of Human Services Licensing annual inspection on January 10, 2019 of the above facility, the violations with 55 pa. Code Ch. 2800 (relating to Assisted Living Residence) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa.Code Ch. 2800 must be maintained.

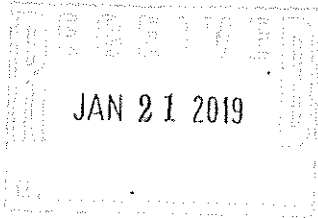
In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

Jacqueline L. Rowe
Director

Enclosure
Violation Report



LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

ALR Name: Oakbridge Terrace at Normandy Farms Estates		License Number: 138980
Address: 9000 Twin Sho Drive, Blue Bell, PA 19422		County: Montgomery
Administrator: Cheryle Eustace		
Legal Entity Name: Acts Retirement Life Communities Inc.		
Legal Entity Address: 375 Morris Road, West Point, PA 19486		
Certificate(s) of Occupancy: 1-2 (L&I) 08/20/2010		
Type of Inspection: Full		
Reason(s) for inspection(s): Renewal		
On-Site Inspections Dates and Department Representatives On-Site: Jan 10, 2019- Youn Hjo Chung, Natasha Braswell		
Off-Site Inspection Dates and Inspectors, if Applicable: N/A		
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 58	Number of Residents who:	
Number of Residents Served: 54	Receive Supplemental Security Income: 0	
Secured Dementia Care Unit In Home: yes	Are 60 Years of Age or Older: 54	
Area: Cranberry Suites	Have Mental Illness: 30	
Secured Unit Capacity, if Applicable: 12	Have an Intellectual Disability: 0	
Number of Residents Served in Secured Dementia Care Unit, if applicable: 9	Have a Mobility Need: 10	
Number of Current Hospice Residents: 2	Have a Physical Disability: 0	
Number of Hospice Residents in past year: 2		

LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

2800.3 (d) – The assisted living residence shall post the current license, a copy of the current license inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the assisted living residence.

Violation: On January 10th, 2019 the home did not have the current license, a copy of the current license inspection summary, and a copy of this chapter posted anywhere in the assisted living residence.

Plan of Correction:

Copy of the current license inspection summary and current license was obtained has been placed in a public place on OBT for anyone to review. Spot check and audit by DAL will be completed to ensure items are still present for anyone to view. Results of audit will be brought to quarterly QA meetings for discussion.

<small>Printed Name and Title of Legal Entity Representative (Required on all pages)</small> CHERYL EUSTACE RN. DIRECTOR OF ASSISTED LIVING	
<small>Signature of Legal Entity Representative (Required on all pages)</small> <i>Cheryl Eustace RN</i>	<small>Date</small> 1/22/19
DEPARTMENT USE ONLY – HOMES MAY NOT WRITE BELOW THIS LINE!	
The above plan of correction is approved as of <u>2/7/19</u> <small>(Date)</small>	Plan of correction implementation status as of <u>2/7/19</u> <small>(Date)</small>
The above plan of correction was approved by <u>AAA</u> <small>(Initials)</small>	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented – Adequate Progress <input type="checkbox"/> Partially Implemented – Inadequate Progress <input type="checkbox"/> Not Implemented

LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

Regulation 2800.64 (a) - Prior to initial employment as an administrator, a candidate shall successfully complete the following:

- (1) An orientation program approved and administered by the Department.
- (2) A 100-hour standardized Department-approved administrator training course. The training provided for in § 2800.69 (relating to additional dementia-specific training) shall be in addition to the 100-hour training course.
- (3) A Department-approved competency-based training test with a passing score.

Violation: Staff member A, an administrator of the residence, did not complete an orientation program approved and administered by the Department.

Plan of Correction:

On 1/11/19, Cheryl Eustace RN, Director of Assisted living enrolled in the Assisted Living Administrator Orientation course. This course was the first one offered in 2019. Cheryl will attend the course at Penn State in Monaca, PA on February 28, 2019. Cheryl will forward completion document when available. Please see attached confirmation for enrollment in the Assisted Living Administrator Orientation Training. Certificate of completion will be brought to the next quarterly QA meeting.

Printed Name and Title of Legal Entity Representative (Required on all pages)

Cheryl Eustace RN Director of Assisted Living

Signature of Legal Entity Representative (Required on all pages)

Cheryl Eustace RN

Date 1/22/19

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(Date)

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(Initials)

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LICENSING INSPECTION SUMMARY
Assisted Living Residences -- 55 Pa.Code § 2800

2800.66(a) - Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation training that includes the following:

- (1) Resident rights.
- (2) Emergency medical plan.
- (3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (36 P.S. §§ 10225.101-10225.6102).
- (4) Reporting of reportable incidents and conditions.
- (5) Safe management techniques.
- (6) Core competency training that includes the following:
 - I. Person-oriented care.
 - II. Communication, problem solving and relationship skills.
 - III. Nutritional support according to resident preference.

Violation: Staff member B, an ancillary staff person hired on 12/06/2018, didn't complete the training on resident's rights, emergency medical plans, reportable incidents and conditions, and safe management techniques, within 40 scheduled working hours.

Plan of Correction:

The manager of the ancillary staff member who did not complete training was educated on the process of assigning the appropriate trainings and the time frame in which they are to be completed. Manager will ensure that all trainings will be completed by all new employees within the first 40 hours of being hired. Audits completed by managers will be reviewed at quarterly QA meetings.

Within 15 days of receiving this POC, Administrator or a designee will audit all staff's training records to ensure compliance with the referenced reg. Administrator or a designee will develop a training checklist that will enable compliance with reg. 2800.65e. 2/7/19

A.A.A.

Printed Name and Title of Legal Entity Representative (Required on all pages)
 CHERYL EUSTACE, RN DIRECTOR OF ASSISTED LIVING

Signature of Legal Entity Representative (Required on all pages) Date
 Cheryl Eustace RN 1/22/19

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LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

2800.69 – 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.

Violation: Staff member B, an ancillary staff person hired on 12/06/2018, did not receive at least 4 hours of dementia-specific training within 30 days of hire.

Plan of Correction:

Director of Assisted Living placed a call to the Manager of the ancillary staff member to inform them that this employee must be assigned 4 hours of Dementia training. The training will be completed through Relias Modules and final exam will be completed. The manager was educated on how to assign new employees the Relias modules that are required to be completed within 30 days of hire. The DAL and managers will ensure that all new hires receive the 4 hours of dementia specific trainings. Audits will be performed and results will be brought to quarterly QA meetings.

Within 15 days of receiving this POC, the Administrator or a designee will audit all staff's record to ensure compliance with the referenced reg. Administrator will develop a training checklist to track employee's required trainings specified in the applicable reg. 2/7/19

A.A.A

Printed Name and Title of Legal Entity Representative (Required on all pages)
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LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

Regulation 2800.132(f) - Alternate exit routes shall be used during fire drills.

Violation: The residence used the same exit routes (Zone A to F) for 8 consecutive months from August 2018 through December 2018.

Plan of Correction:

Director of Assisted Living spoke to the staff member who conducts the fire drills regarding the exits routes being used for drills. Normandy Farms Estates in the future will alternate exit routes each time a fire drill is conducted and will be documented on appropriate form. Audits of monthly fire drills by DAL will be performed to ensure compliance and results will be brought to quarterly QA meetings.

Within 15 days of receiving this POC, the staff shall be re-trained on reg. 2800.132f. The monthly audit of fire drills record and the training provided to staff shall be documented.

2/7/19

AAA

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LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

Regulation 2800.106(a) - The residence shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Violation: On 01-10-19, the glucometer for resident #1 was not calibrated with the correct date or time.

Resident #2 is proscribed acetaminophen 325 mg as a PRN. On 01-10-19 the medication was not available in the home.

Plan of Correction

Resident #1: Staff attempted to recalibrate the time and date on glucometer but were unable to do so. A call was placed to LIFESCAN, manufacturer of the glucometer for assistance. Troubleshooting of the glucometer was unsuccessful. LIFESCAN said that there must be a problem with the glucometer and they are sending a new one out to the resident. DAL will calibrate the glucometer when it arrives. Med tech will check daily to ensure the date and time are correct on the new glucometer to ensure accuracy. A back up glucometer has been purchased to have in case of glucometer malfunctioning again.

Resident #2: Call was placed to pharmacy to reorder the missing acetaminophen and it was delivered and placed in the medication cart. In future, staff will do daily checks on medications requiring refills and inform the resident nurse. Resident nurse will in turn call the pharmacy to refill any medications. Once the medications arrive, the evening nurse will check in all medications and see that they are placed into the medication cart.

Audits will be completed on resident #1 and resident #2 and results will be presented in quarterly QA meetings.

Within 15 days of receiving this POC, The Administrator or a designee will audit all resident's record to ensure that required PRN meds are readily available. The audit will include the cross checking of Doctors orders against MARS documentation and the contents of medication cart, to ensure accuracy and compliance with the reg. Routine checks on the glucometer to ensure proper functioning shall be documented. 2/7/19

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LICENSING INSPECTION SUMMARY
Assisted Living Residences – 55 Pa.Code § 2800

Regulation 2800.233(c) - If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

Violation: The key-locking device leading to the enclosed courtyard in the residences Secure Dementia Unit did not have the directions for its operation.

Plan of Correction

In the Secure Memory Care Unit, the door with the key locking device had directions for operation placed directly next to the key pad. Director of Assisted Living will ensure the directions are in place at all times during her daily rounds of the Memory Care Unit. Audits will be completed and the results will be presented at quarterly QA meetings.

On receiving this POC, the Administrator shall immediately post the direction for operating the key-locking device leading to the enclosed courtyard by the Secure Dementia Care Unit. Administrator will ensure that the posted direction remains in place at all times. 2/7/19

A.A.A

Printed Name and Title of Legal Entity Representative (Required on all pages)	
CHERYL EUSTACE RD DIRECTOR OF ASSISTED LIVING	
Signature of Legal Entity Representative (Required on all pages)	Date
<i>Cheryl Eustace RD</i>	1/22/19
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