



pennsylvania
DEPARTMENT OF HUMAN SERVICES

**Sent via e-mail alcllicense@enlivant.com
Sent via e-mail lbellport@enlivant.com
Sent via e-mail jdetzner@enlivant.com
November 8, 2019**

Mr. Matthew Coleman
Vice President
North Wales 1091 PCH BG OPCO, LLC
330 North Wabash Avenue, Suite 3700
Chicago, Illinois 60611

RE: Park Creek Place – Personal Care
1091 Horsham Road
North Wales, Pennsylvania 19454
License #: 142571

Dear Mr. Coleman:

As a result of the Department's Bureau of Human Services Licensing inspection on August 19, 2019 of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) 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. 2600 must be maintained.

Sincerely,

Sandra Wooters

Sandra Wooters, MHS, ACG
Human Services Licensing Supervisor

Enclosure
Violation Report

Violation Report

Facility Information

Name: *PARK CREEK PLACE - PERSONAL CARE*
Address: *1091 HORSHAM ROAD,, NORTH WALES, PA 19454*
County: *MONTGOMERY* Region: *SOUTHEAST*

License Number: 14257

Administrator

Name: *Joe Detzner* Phone: *2155429670* Email: *LBellport@enlivant.com*

Legal Entity

Name: *NORTH WALES 1091 PCH BG OPCO LLC*
Address: *330 N WABASH AVENUE,SUITE 3700, CHICAGO, IL, 60611*

Certificate(s) of Occupancy

Type: *C-2 LP* Date: Issued By:

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *64* Waking Staff: *48*

Inspection

Type: *Partial* BHA Docket #: Notice: *Unannounced*
Reason: *Provisional,Monitoring*

Inspection Dates and Department Representative

08/19/2019 - On-Site: Dean Gray

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *72* Residents Served: *52*

Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

Hospice

Current Residents: *5*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *52*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *12* Have Physical Disability: *1*

 *Lori Bellport, Executive Director 11/7/19*

08/19/2019

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PARK CREEK PLACE - PERSONAL CARE

14257

185a - Implement Storage Procedures

Regulations

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident #1 is prescribed Bisacodyl 5 MG Tablet - 1 tab by mouth daily as needed. On 08/19/19, this medication was not available in the home.

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.)

185. a

Resident #1 bisacodyl 5mg was ordered and delivered to community on 8/19/19 by the licensed nurse

Current Residents medications were audited 9/10/19 by the CSM and/or designee to ensure that all medications ordered are in house and available on the medication carts.

Nurses and Medication Technicians were re-educated 9/4/2019 by the CSM on regulation 2600.185.a, ensuring of access to all ordered medications ensuring they are available and on the Med Carts.

CSM and/ or designee will perform medication audits on 5 residents receiving medications weekly for 4 weeks, then monthly for 2 months, to ensure ordered medications are available on the med carts.

Results of the audits will be reviewed monthly via QA process.

Legal Entity Representative

Lori Bellport
Signature

Lori Bellport, Executive Director
Printed Name and Title

11/7/19
Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 11/8/19 (Date)

Plan of correction implementation status as of 11/8/19 (Date)

The above plan of correction was approved by SLW (Initials)

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

PARK CREEK PLACE - PERSONAL CARE

14257

187b - Date/Time of Medication Admin.

Regulations

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

On 08/13/19 at 8:50 am, resident #2 was administered Lorazepam 1 MG Tablet. Staff person A did not initial or record the date and time of administration in the resident's MAR log.

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.)

187. b

Resident #2 suffered no negative effects related to these findings

Narcotic Binder and MAR were audited 9/10/19 by the CSM and/or designee to ensure all narcotics that were signed out, were recorded as given in the medication administration record

Staff person A, was re-educated on the documentation process of narcotic/ medication administration record on 09/04/19 by the CSM

Nurses and Med Techs were re-educated 9/4/2019 by the CSM on regulation 2600.187.b, medications shall be recorded at the time the medication is administered.

CSM and/ or designee will perform audits on 5 resident's narcotic / medication administration records weekly for 4 weeks, then monthly for 2 months, to ensure medications are recorded at the time of administration.

Results of the audits will be reviewed monthly via QA process.

Legal Entity Representative


Signature

Lori Bellport, Executive Director
Printed Name and Title

11/7/19
Date

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08/19/2019

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