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Sent via e-mail [EBrisbone@heritagesl.com](mailto:EBrisbone@heritagesl.com)  
April 20, 2020**

Mr. Scott D. Higgs  
CFO  
IVQ Lansdale OpCo, LP  
211 West Main Street, Suite 400  
Camel, Indiana 46032

RE: Traditions of Lansdale  
1800 Walnut Street  
Lansdale, Pennsylvania 19446  
License #: 145210

Dear Mr. Higgs:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on March 5, 2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

*Claire Mendez*

Claire Mendez  
Human Services Licensing Supervisor

Enclosure  
Licensing Inspection Summary

## Violation Report

### Facility Information

Name: *Traditions of Lansdale*  
 Address: *1800 Walnut Street, Lansdale, Pa 19446*  
 County: *MONTGOMERY*      Region: *SOUTHEAST*

License Number: *145210*

### Administrator

Name: *Elijah Brisbane*      Phone: *215-855-1235*      Email:

### Legal Entity

Name: *IVQ Lansdale OPCO LP*  
 Address: *211 West Main Street, Suite 400, Camel, IN, 46032*

### Certificate(s) of Occupancy

### Staffing Hours

Resident Support Staff: *0*      Total Daily Staff: *100*      Waking Staff: *75*

### Inspection

Type: *Partial*      BHA Docket #:      Notice: *Unannounced*  
 Reason: *Incident*

### Inspection Dates and Department Representative

*03/05/2020 - On-Site: Denise Gillespie, Alex Goldstein*

### Resident Demographic Data as of Inspection Dates

#### General Information

License Capacity: *150*      Residents Served: *69*

#### Secured Dementia Care Unit

In Home: *Yes*      Area: *1st floor*      Capacity: *40*      Residents Served: *22*

#### Hospice

Current Residents: *3*

#### Number of Residents Who:

Receive Supplemental Security Income: *0*      Are 60 Years of Age or Older: *69*  
 Diagnosed with Mental Illness: *22*      Diagnosed with Intellectual Disability: *22*  
 Have Mobility Need: *37*      Have Physical Disability: *7*

252 - Record Content

Regulations

2600.

252. Content of Resident Records - Each resident's record must include the following information:

Description of Violation

Resident 1's record does not include reportable incident dated 2/29/2020.

Resident 2's record does not include reportable incident dated 2/29/2020.

Plan of Correction (POC)

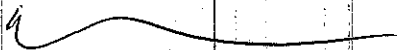
(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

What: Resident #1 and Resident #2 did not have copies of the incident report in their files. Both incidents were scanned into each residents file immediately.

When: Violation was corrected immediately. All Direct Staff and managers will be trained by May 5, 2020 on how to complete an incident report, reporting requirements and what must be maintained in each medical record. (See Attachment C & D)

On-Going: Monthly QA audits will be completed and reviewed at the Quarterly QA meetings. (See Attachment E)

Legal Entity Representative



Signature

Elijah Brasbanc EO

Printed Name and Title

4/16/2020

Date

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The above plan of correction is approved as of 4/20/2020  
(Date)

Plan of correction implementation status as of 4/20/2020  
(Date)

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

Implemented  
 Not Implemented