

Department of Human Services
Bureau of Human Service Licensing

February 16, 2021

ABINGTON SENIOR CARE LLC
1000 LEGION PLACE, SUITE 1600
ATTN - BILL SNOW
ORLANDO, FL, 32801

RE: THE TERRACE AT CHESTNUT HILL
495 EAST ABINGTON AVENUE
PHILADELPHIA, PA, 19118
LICENSE/COC#: 14157

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/01/2020, 06/02/2020, 06/04/2020, 06/05/2020, 06/08/2020, 06/09/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Shawn Parker
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary (LIS)

cs: Pennsylvania Bureau of Human Service Licensing

**Department of Human Services
Bureau of Human Service Licensing
LICENSE INSPECTION SUMMARY**

Facility Information

Name: THE TERRACE AT CHESTNUT HILL **License #:** 14157 **License Expiration Date:** 08/16/2020
Address: 495 EAST ABINGTON AVENUE, PHILADELPHIA, PA 19118
County: PHILADELPHIA **Region:** SOUTHEAST

Administrator

Name: [REDACTED] **Phone:** 215-247-5307 **Email:** [REDACTED]

Legal Entity

Name: ABINGTON SENIOR CARE LLC
Address: 1000 LEGION PLACE, SUITE 1600, ATTN - BILL SNOW, ORLANDO, FL, 32801
Phone: 2152475307 **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I-1 **Date:** 09/17/1997 **Issued By:** City of Philadelphia

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 89 **Working Staff:** 67

Inspection

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint **Exit Conference Date:** 06/09/2020

Inspection Dates and Department Representative

06/01/2020 - Off-Site: [REDACTED]
06/02/2020 - Off-Site: [REDACTED]
06/04/2020 - Off Site: [REDACTED]
06/05/2020 - Off-Site: [REDACTED]
06/08/2020 - Off-Site: [REDACTED]
06/09/2020 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 122 **Residents Served:** 57

Secured Dementia Care Unit

In Home: Yes **Area:** SDCU **Capacity:** 45 **Residents Served:** 25

Hospice

Current Resident: 0

Resident Demographic Data as of Inspection Dates *(continued)*

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 57

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 32

Have Physical Disability: 4

Inspections / Reviews

06/01/2020 Partial

Lead Inspector: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 06/19/2020

8/10/2020 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: Document Submission

Follow-Up Date: 08/17/2020

2/16/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: Not Required

183f - Discontinued Medications

1. Requirements

2600.

- 183.f. Prescription medications, OTC medications and CAM that are discontinued, expired or for residents who are no longer served at the home shall be destroyed in a safe manner according to the Department of Environmental Protection and Federal and State regulations. When a resident permanently leaves the home, the resident's medications shall be given to the resident, the designated person, if any, or the person or entity taking responsibility for the new placement on the day of departure from the home.

Description of Violation

Resident #1 was discharged from the home on [REDACTED]. Upon discharge, residents medications were not given to the resident or designated party. Resident #1's medications were not made available for the resident or designated party to pick up until several days after discharge.

Plan of Correction - 08/10/2020**Directed**

Dispute. Resident's responsible party submitted a 30-day letter of discharge. RP refused to provide a date or time of pick-up for the resident. Community's Executive Director contacted the local ombudsman, Dan Anderson, for assistance. RP still refused to provide information and insisted that as [REDACTED] provides his medications, [REDACTED] had a 30-day supply at home. [REDACTED] removed resident from the community after visiting hours without notice. Arrangements were made for [REDACTED] to pick-up remaining meds a couple days later. RP canceled. See Attachment A for her text message. This information was provided to the surveyor.

Directed POC - Admin or designee will ensure all prescription, OTC, and CAM medications are destroyed or given to the resident, the designated person, or the person or entity taking responsibility for the new placement in accordance with regulation 2600.183f. Training for staff involved with discharges to be completed by 08-17-2020.

SP 08-10-2020

Completion Date: 08/17/2020

Document Submission - 02/16/2021**Implemented**

n light of transition where those responsible for POC and Implementation having been terminated I am completing this as the new ED of the community.
Community will follow its clinical policy for medication handling upon death or discharge of resident. See attached policy. Along with Training form showing staff were trained on the policies.

187a - Medication Record

1. Requirements

2600.

- 187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:
1. Resident's name.
 2. Drug allergies.
 3. Name of medication.
 4. Strength.
 5. Dosage form.
 6. Dose.
 7. Route of administration.
 8. Frequency of administration.
 9. Administration times.
 10. Duration of therapy, if applicable.

187a - Medication Record (continued)

11. Special precautions, if applicable.
12. Diagnosis or purpose for the medication, including pro re nata (PRN).
13. Date and time of medication administration.
14. Name and initials of the staff person administering the medication.

Description of Violation

Resident #1 received medication administration services from the home. on several occasions including 5/4/2020, medications were not administered timely as per regulation. The home's eMAR system does not log specific time of day that a medication is administered however, it was reported by several staff persons, and an incident report was filed by the home, acknowledging that medications had been administered on several occasions outside of the designated time frames.

Plan of Correction - 08/10/2020**Directed**

Dispute. See attached medication administration record (Attachment B) which documents that physician orders were followed. Med error reportable submitted in error. See Attachment C.

Directed POC - Admin or designee will ensure Medication Administration Record (MAR) is kept for every resident and administration times are being followed.

SP 08-10-2020

Completion Date: 08/17/2020

Document Submission - 02/16/2021**Implemented**

Policy on Medication administration using eMAR has been in place and currently in use according to policy. Policy reviewed with staff and documentation of training attached.