

Department of Human Services
Bureau of Human Service Licensing

July 21, 2021

[REDACTED]
KAPG PHOENIXVILLE SENIOR HOUSING OPCO LLC
ONE TOWN CENTER ROAD, SUITE 300
SUITE 300
BOCA RATON, FL 33486

RE: SPRING MILL SENIOR LIVING
3000 BALFOUR CIRCLE
PHOENIXVILLE, PA, 19460
LICENSE/COC#: 14632

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/17/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
[REDACTED]

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY

Facility Information

Name: *SPRING MILL SENIOR LIVING* License #: *14632* License Expiration Date: *09/11/2021*
Address: *3000 BALFOUR CIRCLE, PHOENIXVILLE, PA 19460*
County: *CHESTER* Region: *SOUTHEAST*

Administrator

[REDACTED]

Legal Entity

Name: *KAPG PHOENIXVILLE SENIOR HOUSING OPCO LLC*
Address: *ONE TOWN CENTER ROAD, SUITE 300, SUITE 300, BOCA RATON, FL, 33486*

Certificate(s) of Occupancy

Type: *I-1* Date: *09/10/2009* Issued By: *East Pikeland Twp*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *72* Waking Staff: *54*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Incident* Exit Conference Date: *06/17/2021*

Inspection Dates and Department Representative

06/17/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *98* Residents Served: *60*

Secured Dementia Care Unit

In Home: *Yes* Area: *Memory Care* Capacity: *22* Residents Served: *10*

Hospice

Current Residents: *6*

Number of Residents Who:

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

Inspections / Reviews

06/17/2021 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *07/12/2021*

7/13/2021 - POC Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *07/19/2021*

7/21/2021 - Document Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Not Required*

16c - Written Incident Report

1. Requirements

2600.

- 16.c. The home shall report the incident or condition to the Department’s personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On 5/6/21, staff member A reported seeing staff member B abuse resident #1 during the evening shift on 5/2/21. The home did not report this incident to the department until 5/11/21.

Plan of Correction

Accept

6/8/2021 Mandatory Abuse Reporting Training completed by [REDACTED].
 Act 13 Reported and completed
 6/30/21 Mandatory Abuse training initiated for all staff- to be compliant by 7/16/2021.
 All staff to continue to receive abuse training monthly for 3 months.
 BOM to review abuse training attendance at QA for compliance.
 Completion Date: 07/16/2021

Document Submission

Implemented

6/8/2021 Mandatory Abuse Reporting- See attached
 6/30/2021 Mandatory Abuse Training- See attached

225c - Additional Assessment

1. Requirements

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.

Description of Violation

Resident #1 had a significant change in behaviors over the course of the last year and a half. The home did not complete a new assessment to address this significant change of the residents behavioral problems.

Plan of Correction

Accept

6/21/2021 All memory care RASP were audited for behaviors and plan to address behavior problems by Memory Care Director. All personal care RASP were audited for behaviors and plan to address behavior problems by DHW.
 7/9/2021 Nursing staff inserviced on behaviors- when to report. who to report behaviors to by Memory Care Director. Nursing staff inserviced on behavior log tool, to be used by care managers to report behaviors to nurse, MCD, DHW, ADHW. Behaviors logged on behavior log to be reviewed by MCD and DHW weekly.
 10% of RASP will be audited by MCD/ DHW for accuracy reflecting current behaviors monthly for 3 months then quarterly for 3 quarters. Audits will be reported and reviewed in quarterly QA.
 Completion Date: 07/09/2021

Document Submission

Implemented

6/21/2021 RASP audited Personal Care and Memory Care- See attached.
 7/9/2021 Behavior inservice- See attached

227d - Support Plan Medical/Dental

1. Requirements

2600.

227.d. Each home shall document in the resident’s support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident’s physician, physician’s assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

Resident 1# had a significant change in behaviors over the course of the last year and a half. Resident #1 has become very aggressive. The change in behaviors was documented in nurses' notes but all support plans for this resident list no aggression. Therefore, there is no plan to address the resident's aggressive behavior.

Plan of Correction

Accept

6/30/2021 RASP inservicing completed by DHW, ADHW, MCD, LPN.

6/21/2021 All memory care RASP were audited for behaviors and plan to address behavior problems by Memory Care Director. All personal care RASP were audited for behaviors and plan to address behavior problems by DHW.

7/9/2021 Nursing staff inserviced on behaviors- when to report. who to report behaviors to by Memory Care Director. Nursing staff inserviced on behavior log tool, to be used by care managers to report behaviors to nurse, MCD, DHW, ADHW. Behaviors logged on behavior log to be reviewed by MCD and DHW weekly.

10% of RASP will be audited by MCD/ DHW for accuracy reflecting current behaviors monthly for 3 months then quarterly for 3 quarters. Audits will be reported and reviewed in quarterly QA.

Completion Date: 07/09/2021

Document Submission

Implemented

6/21/2021 RASP audited Personal Care and Memory Care- See attached

6/30/2021 RASP inservice- See attached

7/9/2021 Behavior inservice- See attached