

Department of Human Services  
Bureau of Human Service Licensing

February 7, 2022

[REDACTED]  
IVQ LANSDALE OPCO LP  
[REDACTED]  
[REDACTED]

RE: TRADITIONS OF LANSDALE  
1800 WALNUT STREET  
LANSDALE, PA, 19446  
LICENSE/COC#: 14521

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/13/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Mia Johnson

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services  
Bureau of Human Service Licensing  
**LICENSING INSPECTION SUMMARY - PUBLIC**

**Facility Information**

Name: *TRADITIONS OF LANSDALE* License #: *14521* License Expiration: *02/28/2022*  
Address: *1800 WALNUT STREET, LANSDALE, PA 19446*  
County: *MONTGOMERY* Region: *SOUTHEAST*

**Administrator**

Name: [REDACTED] Phone: *215-855-1235* Email: [REDACTED]

**Legal Entity**

Name: *IVQ LANSDALE OPCO LP*  
Address: *765 SKIPPACK PIKE, SUITE 300, BLUE BELL, PA, 19422*  
Phone: *2158551235* Email: [REDACTED]

**Certificate(s) of Occupancy**

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *91* Waking Staff: *68*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Incident* Exit Conference Date: *09/13/2021*

**Inspection Dates and Department Representative**

09/13/2021 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *150* Residents Served: *66*

**Secured Dementia Care Unit**

In Home: *Yes* Area: *SDCU* Capacity: *38* Residents Served: *16*

**Hospice**

Current Residents: *0*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *65*  
Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *25* Have Physical Disability: *1*

**Inspections / Reviews**

**09/13/2021 - Partial**

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *01/16/2022*

Inspections / Reviews (*continued*)

01/20/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: *01/23/2022*

02/07/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

## 42b - Abuse

## 1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

**Description of Violation**

On [REDACTED], at approximately 8:10 pm, staff heard resident 1 yelling from [REDACTED] room. Resident 1 was observed lying on the floor by [REDACTED] door and resident 2 was observed sitting on [REDACTED] bed. Resident 1 stated resident 2 had "pushed [REDACTED] and [REDACTED] hit [REDACTED] head". Both residents were sent to the hospital for evaluation. Resident 1 returned back to the home around 12:00 am with no injuries noted.

On [REDACTED], the nurse received a call from the Emergency room physician stating that resident 1's x-ray from the night before was reviewed today and the resident was diagnosed with a left pelvic fracture. Resident 2 was sent to an inpatient psychiatric hospital for evaluation.

**Plan of Correction****Accept**

*What:* On [REDACTED], at approximately 8:10 pm, staff heard resident 1 yelling from [REDACTED] room. Resident 1 was observed lying on the floor by [REDACTED] door and resident 2 was observed sitting on [REDACTED] bed. Resident 1 stated resident 2 had "pushed [REDACTED] and she hit [REDACTED] head". Both residents were sent to the hospital for evaluation. Resident 1 returned back to the home around 12:00 am with no injuries noted. On [REDACTED] the nurse received a call from the Emergency room physician stating that resident 1's x-ray from the night before was reviewed today and the resident was diagnosed with a left pelvic fracture. Resident 2 was sent to an inpatient psychiatric hospital for evaluation.

*Who:* Resident Care Director or designee

*How:* Following any incidents, the care team will assess the residents involved. Residents will be sent to the hospital for evaluation. If recommended by PCP resident will be sent to psychiatric hospital for evaluation. Traditions of Lansdale will continue to hold dementia trainings for staff, continue to address known concerns in RASPs, continue to encourage participation in activities to keep residents engaged. Because such incidents cannot always be anticipated or prevented, we will continue to assess residents and ensure they receive any medical care needed.

*When:* Immediately

*Ongoing:* Incidents will be reviewed during quarterly QA meeting

**Document Submission****Implemented**

*Following any incidents, the care team will assess the residents involved. Residents will be sent to the hospital for evaluation. If recommended by PCP resident will be sent to psychiatric hospital for evaluation. Traditions of Lansdale will continue to hold dementia trainings for staff, continue to address known concerns in RASPs, continue to encourage participation in activities to keep residents engaged. Because such incidents cannot always be anticipated or prevented, we will continue to assess residents and ensure they receive any medical care needed.*