

Department of Human Services
Bureau of Human Service Licensing

March 31, 2022

[REDACTED], ADMINISTRATOR
ACTS RETIREMENT-LIFE COMMUNITIES INC
420 DELAWARE DRIVE
FORT WASHINGTON, PA, 19034

RE: OAKBRIDGE TERRACE AT SPRING
HOUSE ESTATES
728 NORRISTOWN ROAD
LOWER GWYNEDD, PA, 19002
LICENSE/COC#: 13901

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/14/2022 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 - PUBLIC

Facility Information

Name: *OAKBRIDGE TERRACE AT SPRING HOUSE ESTATES* License #: *13901* License Expiration: *05/31/2023*
Address: *728 NORRISTOWN ROAD, LOWER GWYNEDD, PA 19002*
County: *MONTGOMERY* Region: *SOUTHEAST*

Administrator

Name: [REDACTED] Phone: *2156288110* Email: [REDACTED]

Legal Entity

Name: *ACTS RETIREMENT-LIFE COMMUNITIES INC*
Address: *420 DELAWARE DRIVE, FORT WASHINGTON, PA, 19034*
Phone: *2156288110* Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *06/01/2001* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *54* Waking Staff: *41*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *03/14/2022*

Inspection Dates and Department Representative

03/14/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *54* Residents Served: *37*

Special Care Unit

In Home: *Yes* Area: *OBT West* Capacity: *30* Residents Served: *17*

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *37*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *17* Have Physical Disability: *1*

Inspections / Reviews

03/14/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *04/01/2022*

03/30/2022 - POC Submission

Inspections / Reviews (*continued*)

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *04/04/2022*

03/31/2022 - Document Submission

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

25b Contract signatures and renewal

1. Requirements

2800.

25b . The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees. The contract must run month-to-month with automatic renewal unless terminated by the resident with 14 days notice or by the residence with 30 days notice in accordance with § 2800.228 (relating to transfer and discharge).

Description of Violation

Resident #1 was admitted to the residence on [REDACTED] The contract dated [REDACTED] was not signed by the resident.

Plan of Correction

Accept

Contract reviewed with DAL and resident. Resident signed the contract. Will note on paperwork when and if resident is unable to sign at the time of the contract review

Completion Date: 03/15/2022

Document Submission

Implemented

See above and attachments

41e Signed statement

1. Requirements

2800.

41.e. A statement signed by the resident and, if applicable, the resident's designated person acknowledging receipt of a copy of the information specified in subsection (d), or documentation of efforts made to obtain signature, shall be kept in the resident's record.

Description of Violation

Resident # 1's record did not contain a statement signed by the resident acknowledging receipt of a copy of the resident rights and complaint procedures.

Plan of Correction

Accept

This was part of the contract which is attached in the other 25b

Completion Date: 03/15/2022

Document Submission

Implemented

See POC and attachments

42s Privacy - self/possessions

1. Requirements

2800.

42.s. A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.

Description of Violation

On 3/14/22 at 12:04 pm, staff member B administered [REDACTED] to resident #2 during lunch in the dining room. There were two other residents present.

Plan of Correction

Accept

Medication in the dining room is a residents preference. to document this, we have developed a form for residents and designated person sign and will be updated in care plan

Completion Date: 03/31/2022

Document Submission

Implemented

See attached

101j7 Lighting/operable lamp

1. Requirements

2800.

101.j. Each resident shall have the following in the living unit:

7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

Resident #3 does not have access to a source of light that can be turned on/off at bedside.

Plan of Correction

Accept

Tap light bought for resident and hung on wall, Instructed resident and family on how to use,

Completion Date: 03/21/2022

Document Submission

Implemented

see attached

191 Resident right to refuse

1. Requirements

2800.

191. Resident Education - The home shall educate the resident of the right to question or refuse a medication if the resident believes there may be a medication error. Documentation of this resident education shall be kept.

Description of Violation

Resident #1, admitted [redacted], has not been educated to the resident's right to refuse medication if the resident believes that there may be a medication error.

Plan of Correction

Accept

This is part of the resident contract paperwork - was signed by the resident when signing contract which is in the other attachment, Reviewed the paperwork with the resident and [redacted] did sign

Completion Date: 03/15/2022

Document Submission

Implemented

see above

234a Admission – support plan

1. Requirements

2800.

234.a.1. Within 72 hours of the admission, or within 72 hours prior to the resident’s admission to the special care unit, a support plan shall be developed, implemented and documented in the resident record.

Description of Violation

Resident 4 was admitted to the special care unit on [redacted]. However, the resident’s initial support plan was completed on [redacted].

Plan of Correction

Accept

Resident move in date was originally [redacted] and d/t covid was changed until [redacted] Support plan was then updated on [redacted] Surveyor did not see it in the chart at time of review - was in the care plan

Completion Date: 03/14/2022

Document Submission

Implemented

see attached