Department of Human Services
Bureau of Human Service Licensing

July 14, 2022

[redacted]
ABINGTON SENIOR CARE LLC
[redacted]

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 06/14/2022 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

Facility Information

Name: *THE TERRACE AT CHESTNUT HILL* **License #**: *14157* **License Expiration**: *08/16/2022*

Addre : *495 EAST ABINGTON AVENUE, PHILADELPHIA, PA 19118*

County: *PHILADELPHIA* **Region**: *SOUTHEAST*

Administrator

Name: [redacted] **Phone**: [redacted] **Email**: [redacted]

Legal Entity

Name: *ABINGTON SENIOR CARE LLC*

Address: [redacted]

Phone: [redacted] **Email**: [redacted]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff**: *126* **Waking Staff**: *95*

Inspection Information

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

Reason: *Incident* **Exit Conference Date**: *06/14/2022*

Inspection Dates and Department Representative

06/14/2022 On Site [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *122* **Residents Served**: *78*

Secured Dementia Care Unit

In Home: *Yes* **Area**: *Memory Care* **Capacity**: *45* **Residents Served**: *34*

Hospice

Current Residents: *6*

Number of Residents Who:

Receive Supplemental Security Income: *0*

Are 60 Years of Age or Older: *76*

Diagnosed with Mental Illness: *2*

Diagnosed with Intellectual Disability: *0*

Have Mobility Need: *48*

Have Physical Disability: *2*

Inspections / Reviews

06/14/2022 - Partial

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *07/09/2022*

Inspections / Reviews *(continued)*

07/13/2022 - POC Submission

Reviewer: [redacted] **Follow-Up Type:** *Document Submission* **Follow-Up Date:** *07/18/2022*

07/14/2022 - Document Submission

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

15a - Resident Abuse Report

1. Requirements

2600.
15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

On [redacted]2022 and [redacted]/22, Staff person A, assisted resident #1 in ordering food from a local restaurant to be delivered to the home. Staff person A then used the residents credit card to also order food for themselves from the restaurant without the resident's permission. This incident was reported to the home on [redacted]/22 however, this allegation of abuse was not reported to the local area agency on aging in writing via the Act 13 form.

Plan of Correction ***Accept***

Written report was sent to Local area agency on aging on 7/8/2022 to have incident on file. Director of Wellness and Nursing support staff were educated on Suspected Resident Abuse Reporting and investigation Requirements. Copy of report sent to AAA and documentation of training attached.

Completion Date: *07/08/2022*

Document Submission ***Implemented***

Written report was sent to Local area agency on aging on 7/8/2022 to have incident on file. Director of Wellness and Nursing support staff were educated on Suspected Resident Abuse Reporting and investigation Requirements. Copy of report sent to AAA and documentation of training attached.
See attached doucments

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]/22, resident #1 asked staff person A, to assist them in ordering food from a local restaurant for delivery to the resident. Staff person A assisted resident #1 by ordering the food with the residents credit card. Staff person A then also ordered food for themselves and charged it to the residents credit card without the residents knowledge or permission. On [redacted]/22, staff person A, again assisted resident #1 to order another food delivery and Staff person A ordered another meal for themselves without the knowledge or permission of the resident to do so. Staff person A, stole approximately $20-30 from resident #1 by ordering food for themselves using the residents credit card.

On [redacted]22, in the late morning, staff person B observed Resident #2 lying in their bed with dried blood on their foot, wrists and neck and on the bed linens. When looking further staff person B identified that resident #2 had made cuts on their wrist and neck with a steak knife found in their room. When asked what happened, resident #2 told staff person B that they were tired and didn't want to be here any more. The PCH indicates that they were not aware that resident had previously attempted to harm themselves prior to their admission, but a health screening and assessment dated [redacted]/22, which was prior to resident's admission to the home, indicated that resident is a risk for self harm because of previous attempts to harm themselves. This information is not identified in the resident's current RASP, dated [redacted]/22, as a need and there is no plan to address the need. Staff interviewed at the home indicate that they were not aware that resident had a previous history of self harm. Though it is unclear at what time the resident made the cuts to their wrists and neck, it was identified that staff person C observed resident #2 in the hallway near their room on the night of [redacted]/22 with a

42b - Abuse (continued)

steak knife that appeared to be from the main dining room. Staff person C inquired about the knife to resident #2, who stated that they had an orange in their room that they wanted to cut up and needed a sharper knife to do so. Staff person C offered assistance to resident #2 however resident declined help from staff with the orange. Staff person C did not pursue the issue further as they felt that was a reasonable explanation for the knife and resident #2 is highly independent with most needs. Staff person B and C both report that they were not aware that resident #2 had a risk of self harm as this information was not in the residents support plan. Staff person C reported that they would not have allowed resident #2 to have the knife on their own if they had known of the resident's history. Staff person C also did not report seeing this to any other staff person of the home at the time they saw resident with the knife.

Plan of Correction ***Accept***

Resident 1 was educated on protecting [redacted] items of value and (Credit Card) and that [redacted] should not allow staff to have [redacted] credit card and was provided an additional lock box to store and protect items of value.
Staff were inserviced on the resident rights and their ability to safeguard their belonging and that it is not appropriate for any staff member to accept tips, gratuities in addition to offers to pay for meals from a resident.
Residents were educated during resident council that they should not be giving out their banking/credit card information to staff. That we can assist them with their purchases but cannot hold their banking/credit card information for any purpose.

Resident 2 Staff responsible for completing assessments and support plans were educated on the importance of having all psychiatric and behavioral health findings noted on the assessment noted on the resident support plan so that care staff members to enable us to best meet residents care needs and keep them safe. All staff were informed that our dining department can provide the service of cutting anything up that a resident needs. staff educated on suicide prevention. Training will be ongoing. training documents attached

Completion Date: *07/08/2022*

Document Submission ***Implemented***

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227d - Support Plan Medical/Dental

1. Requirements

2600.

227d - Support Plan Medical/Dental *(continued)*

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's medical evaluation dated [redacted]22 includes multiple diagnoses physical and psychological. Resident #1's assessment and support plan dated [redacted]/22 does not include any of the resident's diagnoses or any plan to meet any of their medical or psychological needs.

Resident #2 was admitted to the home[redacted]22. There is no indication on the resident's prescreen, completed on [redacted]/22, that resident has of a history of problematic behaviors, however, a health assessment and screening document used by the home also dated [redacted]/22, indicates resident has a risk of self harm due to previous attempts. The resident's assessment and support plan, dated [redacted]22, does not identify this need or document how this need will be met.

Plan of Correction ***Accept***

Resident 1 assessment and support plan is accurate with DX and plan to meet needs. I believe this viloation was for Resident #2 and Resident #3
Resident number #2 was admitted to the hospital [redacted] and was reassessed to not be safe to return to our setting. Staff educated on Suicide prevention. Training documents attached.
Resident #3 Support plan was updated to nclude Diagnosis and How we plan to meet [redacted] medical and psychological needs.

Completion Date: *07/08/2022*

Document Submission ***Implemented***

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Resident number #2 was admitted to the hospital [redacted] and was reassessed to not be safe to return to our setting. Staff educated on Suicide prevention. Training documents attached.
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