

Department of Human Services
Bureau of Human Service Licensing

August 22, 2022

[REDACTED]
NATIONAL HEALTH MANAGEMENT LLC
[REDACTED]

RE: INDEPENDENCE COURT OF
QUAKERTOWN
1660 PARK AVENUE
QUAKERTOWN, PA, 18951
LICENSE/COC#: 12703

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/03/2021 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 - PUBLIC

Facility Information

Name: INDEPENDENCE COURT OF QUAKERTOWN License #: 12703 License Expiration: 07/22/2021
Address: 1660 PARK AVENUE, QUAKERTOWN, PA 18951
County: BUCKS Region: SOUTHEAST

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: NATIONAL HEALTH MANAGEMENT LLC
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 06/13/1998 Issued By: LABOR & INDUSTRY

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 83 Waking Staff: 62

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint Exit Conference Date: 08/03/2021

Inspection Dates and Department Representative

08/03/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 120 Residents Served: 75

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 72
Diagnosed with Mental Illness: 8 Diagnosed with Intellectual Disability: 1
Have Mobility Need: 8 Have Physical Disability: 4

Inspections / Reviews

08/03/2021 - Partial

Lead Inspector: [REDACTED] Follow Up Type: POC Submission Follow Up Date: 09/12/2021

Inspections / Reviews (*continued*)

09/13/2021 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *10/13/2021*

08/22/2022 - Document Submission

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

42c - Treatment of Residents

1. Requirements

2600.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

Staff person A, failed to demonstrate sensitivity in regards to the sexual behaviors of resident #1. [REDACTED]
 [REDACTED] Staff person A described [REDACTED] behavior as "sick". The resident reports that Staff person A, laughs at [REDACTED] and this makes [REDACTED] mad, and [REDACTED] feels bad about [REDACTED] actions.

Plan of Correction**Accept**

Administrator immediately counseled Staff Person A about his/her interaction with Resident #1 and that all residents must be treated with dignity and respect. All Staff, including staff person A will be required to attend Resident Right training that covers 2600.42.c. A resident shall be treated with dignity and respect by 10/12/21. By 10/12/21, Administrator will look into finding a more detailed in-service on Sensitivity related to resident behaviors to in-service all staff.

Completion Date: 10/12/2021**Document Submission****Implemented**

26005.42c document of training for Ancillary staff and Direct Care staff attached

81a - Accommodation

1. Requirements

2600.

81.a. The home shall provide or arrange for physical site accommodations and equipment necessary to meet the health and safety needs of a resident with a disability and to allow safe movement within the home and exiting from the home.

Description of Violation

The home failed to utilize tactile accommodations for resident #2 living with a visual impairment. The room does not meet the safety of the resident while maneuvering around in [REDACTED] room to aid in maximizing [REDACTED] independence.

Plan of Correction**Accept**

By 10/12/21, Administrator or Designee will contact Facility's Home care Pt/Ot to assist with setting up tactile accommodations in resident #2's room to meet 2600.81.a accommodation requirement. Administrator or Designee will also reach out to other resources such as the Blind Association to assist with resident #2's accommodations to meet the safety of the resident to meet requirement 2600.81.a. Administrator or Designee will evaluate other residents in the home that have a disability to assure compliance to 2600.81a. by 10/12/2021.

Completion Date: 10/12/2021**Document Submission****Implemented**

Photos of tactile accommodations in resident #2's room and bedroom set up by Bayada Homecare PT/OT.

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

The assessment for resident #1, dated [REDACTED]/20, does not indicate the residents sexual behaviors. The resident's support plan, dated [REDACTED]/20 does not document how this need will be met.

Plan of Correction**Accept**

Administrator or Designee will update Resident #1 support plan by 10/12/21 to indicate the resident's sexual behaviors and how this need will be met. Support plan will be reviewed and signed by resident #1. Ongoing, Quarterly audits will be conducted by administrator or designee on current residents' support plans to assure compliance to 2600.227d.

Completion Date: 10/12/2021

Document Submission**Implemented**

2600.227d support plan resident #1

227g -Support Plan Signatures**1. Requirements**

2600.

227.g. Individuals who participate in the development of the support plan shall sign and date the support plan.

Description of Violation

Resident #1 participated in the development of his/her support plan on [REDACTED]/20. However, the resident did not sign the support plan.

Plan of Correction**Accept**

Administrator immediately had Resident #1 sign his/her support plan to meet requirement 2600.227.g. Ongoing, Administrator or Designee will make sure all support plans are reviewed and signed with resident prior to being finalized. Administrator or Designee will review this during quarterly Support Plan audits to assure compliance to 2600.227g.

Completion Date: 09/12/2021

Document Submission**Implemented**

2600.227g resident #1 support plan with signature