

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

April 14, 2023

[REDACTED] JR, PRESIDENT
BH BRIGHTVIEW EAST NORRITON OPCO LLC
300 EAST GERMANTOWN PIKE
EAST NORRITON, PA, 19401

RE: BRIGHTVIEW EAST NORRITON
300 EAST GERMANTOWN PIKE
EAST NORRITON, PA, 19401
LICENSE/COC#: 14075

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/18/2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information		
Name: BRIGHTVIEW EAST NORRITON	License #: 14075	License Expiration: 07/31/2023
Address: 300 EAST GERMANTOWN PIKE, EAST NORRITON, PA 19401		
County: MONTGOMERY	Region: SOUTHEAST	

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

Legal Entity		
Name: BH BRIGHTVIEW EAST NORRITON OPCO LLC		
Address: 300 EAST GERMANTOWN PIKE, EAST NORRITON, PA, 19401		
Phone: [REDACTED]	Email: [REDACTED]	

Certificate(s) of Occupancy		
Type: I-2	Date: 02/27/2008	Issued By: East Norriton Township

Staffing Hours		
Resident Support Staff: 0	Total Daily Staff: 125	Waking Staff: 94

Inspection Information		
Type: Partial	Notice: Unannounced	BHA Docket #:
Reason: Complaint	Exit Conference Date: 01/18/2023	

Inspection Dates and Department Representative		
01/18/2023 - On-Site: [REDACTED]		

Resident Demographic Data as of Inspection Dates			
General Information			
License Capacity: 90		Residents Served: 69	
Secured Dementia Care Unit			
In Home: Yes	Area: Wellspring	Capacity: 24	Residents Served: 21
Hospice			
Current Residents: 2			
Number of Residents Who:			
Receive Supplemental Security Income: 0		Are 60 Years of Age or Older: 68	
Diagnosed with Mental Illness: 0		Diagnosed with Intellectual Disability: 2	
Have Mobility Need: 56		Have Physical Disability: 0	

Inspections / Reviews		
01/18/2023 Partial		
Lead Inspector: [REDACTED]	Follow-Up Type: POC Submission	Follow-Up Date: 02/09/2023
02/09/2023 - POC Submission		
Submitted By: [REDACTED]	Date Submitted: 04/13/2023	
Reviewer: [REDACTED]	Follow-Up Type: POC Submission	Follow-Up Date: 02/14/2023

Inspections / Reviews *(continued)*

02/16/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/13/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 03/15/2023

04/14/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/13/2023

Reviewer: [REDACTED]

Follow Up Type: Not Required

23a - Activities of Daily Living Assistance

1. Requirements

2600.

23.a. A home shall provide each resident with assistance with ADLs as indicated in the resident's assessment and support plan.

Description of Violation

The assessment and support plan, dated [REDACTED] for Resident #1 should have indicated the resident requires assistance from two people when transferring. On [REDACTED], the resident did not receive this assistance as required. Only one staff person assisted Resident # 1 when transferring.

Plan of Correction

Accept ([REDACTED] - 02/16/2023)

Associate did not follow proper daily procedures. Associate was held accountable. PCD, HSD held in-service meeting on 1/23/23 for all Personal Care associates. Associates were instructed to review each resident's assessment on a daily basis to alert them of any resident change in condition. Crossover meetings with wellness nurse happen also each shift to address any changes with each resident. Each associate will sign off that they read the 24-hour report log during each crossover shift meeting. The PCD will report the 24-hour report weekly to ensure compliant. This started 1/23/23 and will continue each day going forward.

Licensee's Proposed Overall Completion Date: 02/15/2023

Implemented ([REDACTED] 04/14/2023)

225c - Additional Assessment

2. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

- 2. If the condition of the resident significantly changes prior to the annual assessment.

Description of Violation

Resident #1's assessment, dated [REDACTED] does not include this resident requires two people to assist with transferring resident.

Plan of Correction

Accept ([REDACTED] - 02/16/2023)

HSD & wellness nurse will update any resident's assessment when there is any significant change in care. Meeting was held with all nurse's on 1/23/23 to ensure that all assessments include any significant changes with residents prior to the annual assessment.

HSD &PCD will complete weekly audits of the service plans to ensure any significant changes are noted on the assessment before they are activated. Audits began on 2/3/23 and will continue for the next 4 months.

Licensee's Proposed Overall Completion Date: 02/15/2023

Implemented ([REDACTED] - 04/14/2023)