

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

March 1, 2023

[REDACTED]
SBLP UPPER DUBLIN OPCO LLC
[REDACTED]
[REDACTED]

RE: THE 501 AT MATTISON ESTATE
501 MATTISON AVENUE
AMBLER, PA, 19002
LICENSE/COC#: 14926

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/24/2023 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: THE 501 AT MATTISON ESTATE **License #:** 14926 **License Expiration:** 10/13/2023
Address: 501 MATTISON AVENUE, AMBLER, PA 19002
County: MONTGOMERY **Region:** SOUTHEAST

Administrator

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

Legal Entity

Name: SBLP UPPER DUBLIN OPCO LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I 1 **Date:** 05/09/2022 **Issued By:** Township of Upper Dublin
Type: I 2 **Date:** 05/09/2022 **Issued By:** Township of Upper Dublin

Staffing Hours

Resident Support Staff: **Total Daily Staff:** 25 **Waking Staff:** 19

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Monitoring **Exit Conference Date:** 01/24/2023

Inspection Dates and Department Representative

01/24/2023 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
License Capacity: 118 **Residents Served:** 17
Special Care Unit
In Home: Yes **Area:** 3rd Floor **Capacity:** 42 **Residents Served:** 4
Hospice
Current Residents: 0
Number of Residents Who:
Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 17
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 8 **Have Physical Disability:** 0

Inspections / Reviews

01/24/2023 - Partial
Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 02/06/2023

02/06/2023 - POC Submission
Submitted By: [REDACTED] **Date Submitted:** 02/28/2023
Reviewer: [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 03/06/2023

Inspections / Reviews *(continued)*

03/01/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/28/2023

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

The resident-residence contract for resident #1 dated [REDACTED]/22 was not signed by the resident.

Plan of Correction

Accept ([REDACTED] - 02/06/2023)

The Resident was offered and did sign the contract on [REDACTED]/23.

ALM will retrain Marketing Directors and Move in Coordinator on regulation 2800.25(b) by 2/28/23 to reflect signatures by the Administrator or 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.

ALM or BOM will audit all current AL/MC resident contracts by 2/28/23 to make sure all resident contracts follow regulation 2800.25b.

In addition, ALM/Designee will audit all current resident's contracts on a quarterly basis beginning April 1, 2023, to ensure ongoing compliance for 1 year.

Licensee's Proposed Overall Completion Date: 02/28/2023

Implemented ([REDACTED] - 03/01/2023)

41e Signed statement

2. 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 ([REDACTED] - 02/06/2023)

The Resident signed the acknowledgement of receipt of a copy of the resident rights and complaint procedure on [REDACTED]/23.

ALM/designee will conduct training/education with Move in Coordinator on regulation 2800.41e by 2/28/23 regarding having 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 to obtain signature, shall be kept in the resident's record.

ALM/designee will conduct an audit of all AL/MC resident contracts for compliance of documented signatures for reviewing resident's right and complaint procedure by 2/28/23 to make sure records follow regulation 2800.41e. In addition, ALM/Designee will audit all current resident's contracts on a quarterly basis beginning April 1, 2023, to ensure ongoing compliance for 1 year.

Licensee's Proposed Overall Completion Date: 02/28/2023

41e Signed statement (*continued*)*Implemented* [REDACTED] - 03/01/2023)

103g Storing food

3. Requirements

2800.

103.g. Food shall be stored in closed or sealed containers.

Description of Violation*The following was observed during onsite inspection on 1/24/23:**There was a pack of provolone cheese in the walk-in refrigerator was opened and unsealed.**There was chicken breast in the walk-in refrigerator not in a sealed container.**There was a bag of grits and bag of hot cocoa mix in the dry storage area, both opened and unsealed.***Plan of Correction***Accept* [REDACTED] - 02/06/2023)*The chicken breast, bag of grits and hot cocoa mix were immediately disposed of.**Dining Director, Executive chef and Sous Chef will be in-serviced by ALM, by 2/28/23 regarding regulation 2800.103g, "Food shall be stored in closed or sealed containers".**The Dining Director or designee will be responsible for auditing the kitchen daily x 1 month and then weekly x 4 weeks, to ensure that all food is properly sealed, labeled, dated and stored in closed or sealed containers.***Licensee's Proposed Overall Completion Date:** 02/28/2023*Implemented* [REDACTED] - 03/01/2023)

103i Outdated food

4. Requirements

2800.

103.i. Outdated or spoiled food or dented cans may not be used.

Description of Violation*The following was observed during onsite inspection on 1/24/23:**There were 3 unlabeled, undated blocks of cheese and a tray of chicken breast in the walk-in refrigerator.**There was a dented can of pumpkin puree in the dry storage area.***Plan of Correction***Accept* [REDACTED] - 02/06/2023)*The dented can, three unlabeled and undated blocks of cheese and a tray of chicken breast was immediately removed from the storage and walk-in-refrigerator and disposed of.**Dining Director, Executive chef and Sous Chef will be trained by ALM on regulation 2800.103(i) by 2/28/23 regarding outdated or spoiled food or dented cans may not be used.**Dining Director or designee will ensure cans are inspected for dents by 2/28/23 and then prior to being placed on shelves upon delivery. Any dented can will placed on the "Dented Can Shelf" designated in the dry storage room.**Dining Director/designee will ensure food is labeled and dated before storing away in a closed or sealed container,*

103i Outdated food (continued)

daily per audit form, above.

Dining Director/designee will conduct a daily audit of all canned goods x 1 month and weekly x4 weeks.

Dining Director /designee will conduct a daily audit x1 month and weekly x4 weeks to ensure food in the refrigerator s labeled and dated.

Licensee's Proposed Overall Completion Date: 02/28/2023

Implemented [REDACTED] 03/01/2023)

141a Medical evaluation**5. Requirements**

2800.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:

Description of Violation

The medical evaluation for resident # 2, dated [REDACTED]/22, does not include immunization history. This area of the form is blank.

Plan of Correction

Accept [REDACTED] - 02/06/2023)

The Resident's PCP office was immediately notified on 1/24/23 and the immunizations section was updated by the PCP on 1/24/23.

All Wellness Nurses will be educated by the ED/Health & Wellness Director on regulation 2800.141.a to ensure all sections of the ADME is completed by PCP by 2/28/23.

ED/Health & Wellness Director will audit all AL/MC medical records to ensure all sections of ADME are filled out by 2/28/23.

ED/Health & Wellness Director will conduct monthly audit for ongoing compliance x 3 months and then quarterly x1 year to ensure compliance.

Licensee's Proposed Overall Completion Date: 02/28/2023

Implemented [REDACTED] 03/01/2023)

191 Resident right to refuse**6. 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 # 2, admitted [REDACTED]/22, 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 [REDACTED] - 02/06/2023)

The resident has been educated on and signed right to question or refuse medication if the resident believes there is a medication error. Marketing Directors and Move in Coordinator have been educated on regulation 2800.191. Move n Coordinator will audit residents' contracts monthly for ongoing compliance. ED/Health & Wellness Director will audit quarterly x1 year to ensure ongoing compliance.

191 Resident right to refuse (continued)

Licensee's Proposed Overall Completion Date: 02/28/2023

Implemented () - 03/01/2023)

234a Admission – support plan

7. 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 # 2 was admitted to the special care unit on ()/22. However, the resident's initial support plan was completed on ()/22.

Plan of Correction

Accept () - 02/06/2023)

All Wellness Nurses will be educated by the ED/Health & Wellness Director on regulation 2800.234.a.1 to ensure all support plans are created 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 by 2/28/23.

ED/Health & Wellness Director will audit all AL/MC medical records to ensure all support plans are created within 72 hours of the admission, or within 72 hours prior to the resident's admission to the special care unit by 2/28/23.

ED/Health & Wellness Director will conduct monthly audit for ongoing compliance x3 months and then quarterly x1 year to ensure compliance.

Licensee's Proposed Overall Completion Date: 02/28/2023

Implemented () - 03/01/2023)