

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

February 13, 2023

[REDACTED]
WELL BL OPCO LLC
[REDACTED]
[REDACTED]

RE: BRANDYWINE LIVING AT
HAVERFORD ESTATES
731 OLD BUCK LANE
HAVERFORD, PA, 19041
LICENSE/COC#: 14433

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/01/2023 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: *BRANDYWINE LIVING AT HAVERFORD ESTATES* License #: *14433* License Expiration: *05/09/2023*
 Address: *731 OLD BUCK LANE, HAVERFORD, PA 19041*
 County: *DELAWARE* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *WELL BL OPCO LLC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C 2 LP* Date: *04/05/2000* Issued By: *COPA L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *112* Waking Staff: *84*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: *02/01/2023*

Inspection Dates and Department Representative

02/01/2023 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *118* Residents Served: *69*

Secured Dementia Care Unit
 In Home: *Yes* Area: *Memory Care Unit* Capacity: *24* Residents Served: *19*

Hospice
 Current Residents: *3*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *69*
 Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *43* Have Physical Disability: *0*

Inspections / Reviews

02/01/2023 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *02/17/2023*

02/08/2023 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *02/13/2023*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *02/13/2023*

Inspections / Reviews (*continued*)

02/09/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/13/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 02/16/2023

02/13/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/13/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

187a - Medication Record

1. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

1. Resident's name.
2. Drug allergies.
3. Name of medication.
4. Strength.
5. Dosage form.
6. Dose.
7. Route of administration.
8. Frequency of administration.
9. Administration times.
10. Duration of therapy, if applicable.
11. Special precautions, if applicable.
12. Diagnosis or purpose for the medication, including pro re nata (PRN).
13. Date and time of medication administration.
14. Name and initials of the staff person administering the medication.

Description of Violation

Resident 1 is prescribed [REDACTED] 5
 [REDACTED] and [REDACTED]. However, the resident's January medication administration record does not indicate the diagnosis or purpose for the medication.

Plan of Correction

Accept ([REDACTED] - 02/09/2023)

Wellness Nurse, under direction from Assistant Wellness Director, added late note on MAR on February 2, 2023.

Wellness Director, Assistant Wellness Director, or designee will complete audit of all current resident MARs beginning February 3, 2023 with a completion date of February 10, 2023.

Wellness Director, or Assistant Wellness Director to conduct mandatory trainings on MAR completion and procedures for all Wellness Nurses no later than February 15, 2023.

Wellness Director, or Assistant Wellness Director, to conduct MAR audit on 5 random residents once a week for three months beginning February 6th, 2023 with an end date of April 14, 2023

Process to be reviewed at quarterly Quality Improvement meeting.

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

Implemented ([REDACTED] - 02/13/2023)

187b - Date/Time of Medication Admin.

2. Requirements

187b - Date/Time of Medication Admin. (continued)

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation*Resident 1 is prescribed*

Resident 1's January 2023 medication administration record does not include the initials of the staff person who administered these medications on [REDACTED]/23 at [REDACTED] am.

Plan of Correction**Accept** ([REDACTED] - 02/08/2023)

Wellness Nurse, under direction from Assistant Wellness Director, added late note on MAR on February 2, 2023.

Wellness Director, Assistant Wellness Director, or designee will complete audit of all current resident MARs to verify completion no later than February 10, 2023.

Wellness Director, or Assistant Wellness Director to conduct mandatory trainings on MAR completion and procedures or all Wellness Nurses no later than February 15, 2023.

Wellness Director, or Assistant Wellness Director, to conduct MAR audit on 5 random residents once a week for three months.

Process to be reviewed at quarterly Quality Improvement meeting.

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

Implemented ([REDACTED] - 02/13/2023)

227d - Support Plan Medical/Dental

3. Requirements

2600.

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]/22, does not indicate that the resident has a need for a diet with low cholesterol and no added sodium or how this need will be met.

Plan of Correction**Accept** ([REDACTED] - 02/08/2023)

Assistant Wellness Director updated Care Plan on February 1, 2023 to reflect low sodium and low cholesterol diet.

Wellness Director, or assistant Wellness Director, to audit all current DMEs and care plans to confirm dietary restrictions on the DME are reflected on the care plan.

227d - Support Plan Medical/Dental (continued)

Audit to be concluded no later than February 15, 2023.

Process to be reviewed at quarterly Quality Improvement meeting.

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

Implemented [REDACTED] - 02/13/2023)