

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

April 5, 2023

[REDACTED]
ABINGTON SENIOR CARE LLC
[REDACTED]
[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 02/22/2023 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 TERRACE AT CHESTNUT HILL* License #: 14157 License Expiration: 08/16/2023
 Address: 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: 1000 LEGION PLACE, SUITE 1600, ATTN - BILL SNOW, ORLANDO, FL, 32801
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: I-1 Date: 09/17/1996 Issued By: City of Philadelphia
 Type: Other Date: 09/17/1996 Issued By: City of Philadelphia

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 139 Waking Staff: 104

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Incident Exit Conference Date: 02/22/2023

Inspection Dates and Department Representative

02/22/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 122 Residents Served: 85

Secured Dementia Care Unit

In Home: Yes Area: Lilac Trace Capacity: 45 Residents Served: 33

Hospice

Current Residents: 9

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 82
 Diagnosed with Mental Illness: 3 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 54 Have Physical Disability: 1

Inspections / Reviews

02/22/2023 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 03/17/2023

Inspections / Reviews *(continued)*

03/28/2023 - POC Submission

Submitted By: [REDACTED] Date Submitted: 04/05/2023
Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 04/02/2023

04/04/2023 - POC Submission

Submitted By: [REDACTED] Date Submitted: 04/05/2023
Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 04/15/2023

04/05/2023 - Document Submission

Submitted By: [REDACTED] Date Submitted: 04/05/2023
Reviewer: [REDACTED] Follow-Up Type: Not Required

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] Staff Member A wheeled a resident into the dining room and placed him/her at a table in front of the fire exit. Staff Member A requested help from another dining staff member who was unable to assist. Staff Member A told the resident to move forward to the table. Resident # 1, who ambulates with a wheelchair, stated that he/she was unable to do that and that there was not a place available to sit. Staff Member A argued with the resident telling them to "mind your business or I will beat your ass". Resident # 1 asked the staff member to repeat themselves while rolling towards Staff Member A. The staff member moved into the food serving area that only dining staff are permitted to be present. Resident # 1 followed the staff member and they continued to argue loudly with the staff member continuing to say "mind your business or I will beat your ass." Resident # 1 yelled back "do it" and moved toward the staff person. Staff Member B came and requested Resident # 1 return to the dining room. Staff Member B then accompanied Staff Member A to the elevator. Resident # 1 followed both staff to the elevator and blocked the elevator doors from closing. Staff Member A stated "mind your business or I will beat your ass". Resident # 1 yelled "do it" and Staff Member A then spit in the resident's face. Staff Member A was removed from the floor, spoke with management and admitted to inappropriate behavior, then was immediately terminated and escorted off of the property. The police were called and responded. The home notified the physician and made a report to protective services and the Department.

Plan of Correction**Accept (CM - 04/04/2023)**

Staff member A was terminated immediately after the incident. (See attached termination form). Staff was in-service on regulation 2600.42.b on 3/14/23 by the Executive Director. Moving forward, any staff member who violates regulation 2600.42B will be terminated by Executive Director or any Executive staff personnel. (See attached in-service).

Staff A was walked out of the community and terminated by former ED of the community. (Please see termination letter attached).

Moving forward, on the second Tuesday of each month a mandatory staff meeting will be held. Regulation 2600.42b will also be reviewed at these meetings. Staff will sign off on an in-service sheet that they attended and understand the regulation. The first meeting will be held on April 11, 2023. The Executive Director or designee will hold this meeting. The monthly meetings will occur every month.

Licenses's Proposed Overall Completion Date: 04/02/2023

Implemented (CM - 04/05/2023)

54a - Direct Care Staff

2. Requirements

2600.

54.a. Direct care staff persons shall have the following qualifications:

2. Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry.

Description of Violation

Direct care staff person A, does not have a high school diploma, GED, or active registry status on the Pennsylvania nurse aide registry.

54a - Direct Care Staff (continued)

Plan of Correction**Accept (CM - 04/04/2023)**

ED in-serviced Business Office Manager on Reg# 2600.54A and 2600.65D on 3/15/23. Business Office manager will audit each employee file to ensure that all Direct Care workers have a H.S. Diploma or GED when said employee will be providing Direct Care. Audit will be completed for all Direct Care personnel by 3/31/23. BOM will, going forward use the check off sheet in each newly hired personnel file to ensure compliance of the H.S. Dip./ GED. (see attached check off sheet for new Direct Hire employees). Executive Director will sign off on each newly hired staff member prior to first day of providing Direct Care to verify that a H.S. Dip./GED is in place. The check off sheet was used on the first employees hired in March on the 28th., 2023, and will continue to be used to ensure that employee(s) have a h.s. diploma if required for their job position.

Licensee's Proposed Overall Completion Date: 04/02/2023

Implemented (CM - 04/05/2023)

65d - Initial Direct Care Training

3. Requirements

2600.

65.d. Direct care staff persons hired after April 24, 2006, may not provide unsupervised ADL services until completion of the following:

2. Successful completion and passing the Department-approved direct care training course and passing of the competency test.

Description of Violation

Direct care staff person A, hired on [REDACTED] began providing unsupervised ADL services on [REDACTED]. However, the staff person did not complete and pass the Department-approved direct care training course and pass the competency test.

Plan of Correction**Accept (CM - 04/04/2023)**

ED in-serviced Business Office Manager on Reg# 2600.54A and 2600.65D on 3/15/23. Business Office manager will audit each employee file to ensure that all Direct Care workers have the department approved direct care training certificate.

New hires must prior to their start date provide the BOM with their direct care competency certificate. Audit will be completed by 3/31/23. ED will sign off on all new hired direct care staff employee file to ensure that the direct care certificate is in place prior to their first day of work. See attached in-service.

Audit is completed and finalized as of today 4/2/23. If a new direct care staff member does not have a direct care competency certificate by the time they are scheduled to start their training, then the start date will be moved to a date when they have completed and produced the direct care competency certificate to the Business Office Manager. Direct care staff workers are not allowed to begin their training unless the certificate is in their employee file and employee file is verified and signed off by ED. The ED sign off process was put into place in March 2023. The BOM will give the new hires employee file to ED, prior to the new hire starting. The ED will also check the employee file for compliance and to make sure that all required documents are in the file.

Licensee's Proposed Overall Completion Date: 04/02/2023

Implemented (CM - 04/05/2023)