

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

June 27, 2023

[REDACTED]
ANNS CHOICE INC
16000 ANN'S CHOICE WAY
WARMINSTER, PA, 18974

RE: ANN'S CHOICE
16000 ANN'S CHOICE WAY
WARMINSTER, PA, 18974
LICENSE/COC#: 14439

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/27/2023, 04/11/2023 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: ANN'S CHOICE License #: 14439 License Expiration: 01/02/2023
 Address: 16000 ANN'S CHOICE WAY, WARMINSTER, PA 18974
 County: BUCKS Region: SOUTHEAST

Administrator

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

Legal Entity

Name: ANNS CHOICE INC
 Address: 16000 ANN'S CHOICE WAY, WARMINSTER, PA, 18974
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: 1 2 Date: 11/19/2018 Issued By: Warminster Township

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 65 Waking Staff: 49

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Incident Exit Conference Date: 03/27/2023

Inspection Dates and Department Representative

03/27/2023 On Site [REDACTED]
 04/11/2023 Off Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 98 Residents Served: 57

Special Care Unit
 In Home: No Area: Capacity: Residents Served:

Hospice
 Current Residents: NM

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 57
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 8 Have Physical Disability: 8

Inspections / Reviews

03/27/2023 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 04/23/2023

04/24/2023 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 05/31/2023
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 04/29/2023

Inspections / Reviews *(continued)*

05/10/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/31/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 05/31/2023

06/27/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/31/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

15a Resident abuse report

1. Requirements

2800.

15.a. The residence shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

On [REDACTED]-23, at [REDACTED] am, staff person A, was observed by staff in the home being verbally abusive towards resident #1. This incident was observed by staff person B and C. This incident was reported to staff person D on [REDACTED]-23, at [REDACTED] am. However, this allegation of abuse was not reported to the local Area Agency on Aging.

Plan of Correction

Accept ([REDACTED] - 05/10/2023)

- ALM completed ACT on [REDACTED]/23
- ALM or designee will contact AAA to report suspected abuse and complete the Act 13 form, and submit to AAA. Will also report incident to DHS, and contact local police department.
- Process will start immediately with any accusation or suspicion of abuse, ALM or designee will carry out reporting steps promptly and timely.

Licensee's Proposed Overall Completion Date: 05/05/2023

Implemented ([REDACTED] - 06/27/2023)

42c Dignity/Respect

2. Requirements

2800.

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

Description of Violation

On [REDACTED]-23, at [REDACTED] am, Staff person A, was heard yelling in the hallway communicating about resident #1; standing without a assistive device. Staff person B and C heard staff person A, say "I'm [REDACTED] sick of [REDACTED] not using [REDACTED] wheelchair. I don't care if [REDACTED] falls."

Resident #1 was unaware of this statement, but communicated that staff treatment [REDACTED] as though [REDACTED] a "10 year old" child.

Repeated Violation: 5/4/22, 7/1/22

Plan of Correction

Accept ([REDACTED] - 05/10/2023)

- Education including Resident Rights, Positive Communication Techniques, and Customer Service will be reviewed with Assisted Living Staff.
- Assisted Living Manager or designee to present education, education will be completed by May 30th.
- Beginning the week of 5/1/2023 Assisted Living Manager or designee will conduct resident interviews in the neighborhood to ensure residents are being treated with dignity and respect, and being spoken to in a positive manner.
- 10% of population will be interviewed weekly for 4 weeks, and then 10% of population will be interviewed monthly for 2 months.
- Results will be reported by the ALM or designee at QAPI x3 months beginning in May, and at the annual Quality Management meeting.

42c Dignity/Respect (continued)

Licensee's Proposed Overall Completion Date: 07/21/2023

Implemented (████) - 06/27/2023)

227g Support plan - signatures

3. Requirements

2800.

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 █████-23. However, the resident did not sign and date the support plan.

Repeated Violation: 5/4/22

Plan of Correction

Accept (████) - 05/10/2023)

- Resident's support plan shall be reviewed with resident again and signed by resident
- All current residents care plans to be audited to ensure compliance by 5/12/23
- ALM to establish tracking tool to ensure service plans are opened, completed, and signed timely. Tracking tool will be used on an ongoing basis for 3 months
- Effective 5/1/2023 ALM or designee will audit 100% all new admissions weekly x2 weeks and monthly x2 months
- Results will be reported by the ALM or designee at QAPI x3 months beginning in May, and at the annual Quality Management meeting.

Licensee's Proposed Overall Completion Date: 07/21/2023

Implemented (████) - 06/27/2023)