

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

May 18, 2023

[REDACTED]
CSH EXTON LESSEE LLC
[REDACTED]
[REDACTED]

RE: ARBOR TERRACE EXTON
100 OAKLANDS BOULEVARD
EXTON, PA, 19341
LICENSE/COC#: 14793

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/04/2023 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: ARBOR TERRACE EXTON

License #: 14793

License Expiration: 08/07/2023

Address: 100 OAKLANDS BOULEVARD, EXTON, PA 19341

County: CHESTER

Region: SOUTHEAST

Administrator

Name: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Legal Entity

Name: CSH EXTON LESSEE LLC

Address: [REDACTED]

Phone: [REDACTED]

Email: ronda [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff:

Total Daily Staff: 106

Waking Staff: 80

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Fine

Exit Conference Date: 04/04/2023

Inspection Dates and Department Representative

04/04/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 99

Resident Served: 73

Secured Dementia Care Unit

In Home: Yes

Area: Evergreen

Capacity: 32

Resident Served: 21

Hospice

Current Resident : xx

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 73

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 1

Have Mobility Need: 33

Have Physical Disability: 0

Inspections / Reviews

04/04/2023 Partial

Lead Inspector: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 04/24/2023

04/24/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/10/2023

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 04/29/2023

Inspections / Reviews *(continued)*

04/25/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/10/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 05/10/2023

05/18/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/10/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

82c - Locking Poisonous Materials

1. Requirements

2600.

82.c. Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

Description of Violation

On 04/04/2023, the drawer in the bathroom of resident # [REDACTED] was unlocked, unattended, and accessible with items like [REDACTED] perineal cleanser, [REDACTED] ointment, and [REDACTED] wound cleanser, with a manufacture's label indicating "if ingested, get medical help or contact a Poison Control Center right away". Resident room # [REDACTED] had [REDACTED] perineal cleanser and [REDACTED] toothpaste accessible to the resident. Not all the residents of the home have been assessed capable of recognizing and using poisons safely.

Plan of Correction

Accept ([REDACTED] - 04/25/2023)

Arbor Terrace Exton submits this Plan of Correction (POC) to comply with regulation 2600 et al. and all other applicable regulations and statutes. The preparation and submission of this POC does not constitute an admission of fault or liability on the part of Arbor Terrace Exton or an Agreement of Arbor Terrace Exton as to the truth, accuracy, or validity of the facts alleged, conclusions drawn, or admission of any deficiency issued.

- Upon the Department's findings of the stated citation in violation of 2600.82c, the community's Memory Care Director (MCD) immediately (on 04/05/2023) did a full audit of all memory care bedrooms and removed or locked up any and all poisonous materials found.
- MCD educated all memory care staff on the importance of keeping poisonous materials locked up in each resident's room. All staff who work in memory care were educated by 04/24/2023.
- On 04/12/2023, MCD worked with the Director of Resident Relations to create signs and placed one in each resident's room, stating that staff and families are to comply with keeping all poisonous materials locked up when not actively being used.
- On 04/05/2023, MCD purchased shower caddies on Amazon for staff to place poisonous materials into and then into the locked cabinets. This should make it easier on the staff to comply with this regulation.
- On 04/12/2023, MCD placed an order at a local lock shop for 50 additional keys to the cabinets in memory care residents' rooms. These keys were picked up on 04/19/2023 and distributed to each of the resident's POAs and to any care staff who needed one.
- Going forward, the MCD, administrator, or designee will perform a weekly audit on three random memory care rooms to ensure compliance with this regulation. The first audit took place immediately following the state's visit, on 4/5/23 and then the weekly audit began Monday, April 10. This weekly audit will take place at the beginning of each week on either Monday or Tuesday and continue for 3 months, at which point the MCD and administrator will re-evaluate the need for and frequency of the audit.

Licensee's Proposed Overall Completion Date: 05/06/2023

Implemented ([REDACTED] - 05/18/2023)

187b - Date/Time of Medication Admin.

2. Requirements

2600.

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

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

Description of Violation

Resident #1 is prescribed [REDACTED] three times a day. On [REDACTED]/2023, staff A checked [REDACTED] at [REDACTED] PM (reading [REDACTED] and [REDACTED] PM (reading [REDACTED]). However, the resident's March medication administration record (MAR) has these two numbers switched, which means the staff did not record the information at the time of the administration.

Plan of Correction

Accept ([REDACTED] - 04/25/2023)

Arbor Terrace Exton submits this Plan of Correction (POC) to comply with regulation 2600 et al. and all other applicable regulations and statutes. The preparation and submission of this POC does not constitute an admission of fault or liability on the part of Arbor Terrace Exton or an Agreement of Arbor Terrace Exton as to the truth, accuracy, or validity of the facts alleged, conclusions drawn, or admission of any deficiency issued.

- Upon the Department's findings of the stated citation in violation of 2600.187b, the Resident Care Director (RCD) immediately (on 04/05/2023) educated [REDACTED], the medication technician who made the error referenced in the citation.
- The RCD educated all LPNS and Med Techs that medication administration must be recorded in the eMAR at the time of administration. This training was complete by 04/18/2023.
- Going forward, the RCD, MCD or designee will perform a weekly audit of resident glucometers. The first audit took place immediately following the state's visit, on 4/5/23 and then the weekly audit began Monday, April 10. This weekly audit will take place at the beginning of each week on either Monday or Tuesday and continue for 3 months, at which point the RCD and administrator will re-evaluate the need for and frequency of the audit.

Licensee's Proposed Overall Completion Date: 05/06/2023

Implemented ([REDACTED] - 05/18/2023)