

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

July 11, 2023

[REDACTED], ADMINISTRATOR
BENSALEM PCH LLC
6400 HULMEVILLE ROAD
BENSALEM, PA, 19020

RE: ALLEGRIA AT THE OAKS
6400 HULMEVILLE ROAD
BENSALEM, PA, 19020
LICENSE/COC#: 14367

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/13/2023 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: ALLEGRIA AT THE OAKS **License #:** 14367 **License Expiration:** 05/29/2024
Address: 6400 HULMEVILLE ROAD, BENSALEM, PA 19020
County: BUCKS **Region:** SOUTHEAST

Administrator

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

Legal Entity

Name: BENSALEM PCH LLC
Address: 6400 HULMEVILLE ROAD, BENSALEM, PA, 19020
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I-1 **Date:** 10/18/2018 **Issued By:** Bensalem Township

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 127 **Waking Staff:** 95

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint **Exit Conference Date:** 06/13/2023

Inspection Dates and Department Representative

06/13/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 95 **Residents Served:** 76

Secured Dementia Care Unit

In Home: Yes **Area:** Memory Care Unit **Capacity:** 36 **Residents Served:** 35

Hospice

Current Residents: 8

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 73
Diagnosed with Mental Illness: 34 **Diagnosed with Intellectual Disability:** 2
Have Mobility Need: 51 **Have Physical Disability:** 0

Inspections / Reviews

06/13/2023 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 07/03/2023

06/30/2023 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 07/10/2023
Reviewer: [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 07/04/2023

Inspections / Reviews *(continued)*

07/11/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 07/10/2023

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

187b - Date/Time of Medication Admin.

1. Requirements

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 was prescribed [REDACTED] ointment for ten days. Resident 1's medication administration record does not include the initials of the staff person who administered the ointment on [REDACTED].

Plan of Correction

Accept [REDACTED] - 06/30/2023)

All nurses and med techs were instructed by the DON on June 29, 2023, in regard to the policy/procedure for medication/treatment disbursement. They were also instructed that they are never to leave any blanks in the MAR. If for some reason a medication or treatment is not available or a resident refuses, they were told to mark it as such. Going forward, in order to prevent this from happening again, the oncoming shift nurse/med tech is to monitor the MAR from the off-going shift nurse/med tech. If any initials are missing, the DON/ADON are to be notified immediately. The DON or designee is to monitor the MAR's for compliance.

Licensee's Proposed Overall Completion Date: 07/03/2023

Implemented [REDACTED] - 07/11/2023)

234a - Admission Support Plan

2. Requirements

2600.

234.a. Within 72 hours of the admission, or within 72 hours prior to the resident's admission to the secured dementia care unit, a support plan shall be developed, implemented and documented in the resident record.

Description of Violation

Resident 1 was admitted to the Secure Dementia Care Unit (SDCU) on [REDACTED]. However, the resident's initial support plan was completed on [REDACTED].

Plan of Correction

Accept [REDACTED] - 06/30/2023)

Beginning in June 2023, and monthly thereafter the medical receptionist will perform monthly chart reviews to ensure that the RASP is completed within 72 hours of admission. The chart reviews will continue indefinitely. The June chart checks were completed on June 14, 2023.

The DRS/designee is responsible for on-going compliance and will audit a random selection of 5 charts after the medical receptionist completes the monthly review.

The ED, DRS, ADRS, PCC and the Admission Director meet weekly to discuss future prospective residents and current residents who may move to the secured Memory Care Unit. Beginning in June 2023 at this meeting a list of upcoming admissions and/or transfers to Memory Care will be developed, which will indicate the admission/transfer date, and the date that the RASP will be due. The medical receptionist will be given this list and be responsible for reminding the DRS/designee of the window for the RASP completion.

Licensee's Proposed Overall Completion Date: 06/29/2023

Implemented [REDACTED] - 07/11/2023)