

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

July 28, 2023

[REDACTED]
DRI/HEARTIS BUCKS COUNTY LLC
[REDACTED]
[REDACTED]

RE: HEARTIS BUCKS COUNTY
945 YORK ROAD
WARMINSTER, PA, 18974
LICENSE/COC#: 14855

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 06/14/2023 of the above facility, the citations specified on the enclosed Licensing Inspection Summary (LIS) were found.

We have determined that your plan of correction is: Acceptable

Please submit documentation verifying compliance in SansWrite as corrective actions are implemented. The Department will review this documentation to determine compliance. Please note that in order for the Department to verify your compliance, you are required to upload documentation into SansWrite AFTER the Plan of Correction has been accepted by the Department, and not with the initial submission of your Plan of Correction.

Submit documentation electronically by **08/16/2023**.

If you need assistance regarding submission of evidence to demonstrate compliance, please contact me at [REDACTED] or email [REDACTED]

Sincerely,

[REDACTED]

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: HEARTIS BUCKS COUNTY License #: 14855 License Expiration: 02/02/2024
 Address: 945 YORK ROAD, WARMINSTER, PA 18974
 County: BUCKS Region: SOUTHEAST

Administrator

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

Legal Entity

Name: DRI/HEARTIS BUCKS COUNTY LLC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: I-2 Date: 08/09/2021 Issued By: L & I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 60 Waking Staff: 45

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Complaint Exit Conference Date: 06/14/2023

Inspection Dates and Department Representative

06/14/2023 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 100 Residents Served: 47

Special Care Unit
 In Home: Yes Area: Memory Care Unit Capacity: 24 Residents Served: 13

Hospice
 Current Residents: 5

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 47
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 13 Have Physical Disability: 0

Inspections / Reviews

06/14/2023 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 07/15/2023

07/18/2023 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 07/24/2023
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 07/23/2023

Inspections / Reviews (*continued*)

07/28/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 07/24/2023

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 08/16/2023

85a Sanitary conditions

1. Requirements

2800.
85.a. Sanitary conditions shall be maintained.

Description of Violation

On 6/14/23, at 12:00 pm, staff member A failed to wash [redacted] hands before administering the eye drops to resident 1.
On 6/14/23, at 12:10 pm, staff member A failed to wash [redacted] hands before checking the blood sugar of resident 2.

Plan of Correction

Accept ([redacted] - 07/28/2023)

Staff member A was re-educated on the importance and requirement of proper hand hygiene while assisting with medication or treatments between residents. Resident Care Director, Executive Director, or Generations program Director will provide additional training to all care staff and med techs to ensure the full understanding of the importance of proper hand hygiene while moving from the care of one resident to the next. The re-education was performed by our nurse consultant and completed on 7/21/2023.

Licensee's Proposed Overall Completion Date: 08/16/2023

224c8 Preliminary support plan - participants' signatures

2. Requirements

2800.
224.c.8. Individuals who participate in the development of the preliminary support plan shall sign and date the preliminary support plan.

Description of Violation

Resident # 3 and a designated person participated in the development of [redacted] preliminary support plan; however, resident # 3 and a designated person did not sign and date the preliminary support plan.

Plan of Correction

Accept ([redacted] 07/18/2023)

The preliminary support plan was reviewed and left with the designated person of Resident #3 for signature, however the designated did not sign and return with signatures. An audit was completed on 6/17 and 6/18 to ensure that all preliminary support plans were signed or noted of refusal to sign. Despite refusals to sign, the Community is committed to providing the care as assessed by the Team and re-evaluate as needed/requested by the resident or designated person. Going forward, documentation will be noted on all support plans of refusals to sign as well as explanation of such refusals.

Licensee's Proposed Overall Completion Date: 07/31/2023

225a2 Assessment – significant change

3. Requirements

2800.
225.a.2. The administrator or administrator designee, or an LPN, under the supervision of an RN, or an RN shall complete additional written assessments for each resident. A residence may use its own assessment form if it includes the same information as the Department's assessment form. Additional written assessments shall be completed as follows: If the condition of the resident significantly changes prior to the annual assessment.

225a2 Assessment – significant change (*continued*)**Description of Violation**

Resident #3's significant change assessment plan did not include the date of completion.

Plan of Correction

Accept [REDACTED] - 07/18/2023)

While the date of the change in condition was identified for Resident 3, the computer generated system auto filled the date based on it's due date rather than the date of actual completion. The Resident Care Director and Executive Director presented a screen shot verification of the date that the document was completed in the computer system which was in the required time frame. The presentation of the computer documentation was determined to be insufficient. Going forward, the Resident Care Director will verify the date on the document, and update in writing as necessary. All charts will be audited to ensure accurate dates on the assessments by 8/10/2023

Licensee's Proposed Overall Completion Date: 08/10/2023

252 Records – content

4. Requirements

2800.

252. Content of Resident Records - Each resident's record must include the following information:

1. Name, gender, admission date, birth date and Social Security number.
2. Race, height, weight, color of hair, color of eyes, religious affiliation, if any, and identifying marks.
3. A photograph of the resident that is no more than 2 years old.
4. A language, speech, hearing or vision need which requires accommodation or awareness of during oral or written communication.
5. The name, address, telephone number and relationship of a designated person to be contacted in case of an emergency.
6. The name, address and telephone number of the resident's physician or source of health care.
7. The current and previous 2 years' physician's examination reports, including copies of the medical evaluation forms.
8. A list of prescribed medications, OTC medications and CAM.
9. Dietary restrictions.
10. A record of incident reports for the individual resident.
11. A list of allergies.
12. The documentation of health care services and orders, including orders for the services of visiting nurse or home health agencies.
13. The preadmission screening, initial intake assessment and the most current version of the annual assessment.
14. A support plan.
15. Applicable court order, if any.
16. The resident's medical insurance information.
17. The date of entrance into the residence, relocations and discharges, including the transfer of the resident to other homes owned by the same legal entity.
18. An inventory of the resident's personal property as voluntarily declared by the resident upon admission and voluntarily updated.
19. An inventory of the resident's property entrusted to the administrator for safekeeping.
20. The financial records of residents receiving assistance with financial management.
21. The reason for termination of services or transfer of the resident, the date of transfer and the destination.
22. Copies of transfer and discharge summaries from hospitals, if available.
23. If the resident dies in the residence, a copy of the official death certificate.
24. Signed notification of rights, grievance procedures and applicable consent to treatment protections specified in § 2800.41 (relating to notification of rights and complaint procedures).
25. A copy of the resident-home contract.
26. A termination notice, if any.

252 Records – content (continued)

- 27. A record relating to any exception request under § 2800.229 (relating to excludable conditions; exceptions).
- 28. Ongoing resident progress notes.

Description of Violation

Resident #3's record does not include a photograph of the resident that is no more than 2 years old.

Plan of Correction

Accept [redacted] - 07/18/2023)

Resident #3 refused to have [redacted] photo taken at the time of admission despite multiple efforts. An audit of the resident files was conducted at the time of inspection. All other photos were present and up to date. Going forward, the Resident Care Director or Designee will assure that the resident photo is taken and added to the resident record on the day of admission and updated as required or necessary. Any refusals for photos will be clearly documented in the resident record.

Licensee's Proposed Overall Completion Date: 08/15/2023