

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

September 5, 2023

[REDACTED], ADMINISTRATOR OF HEALTH SERVICES
ACTS RETIREMENT LIFE COMMUNITIES INC
[REDACTED]
[REDACTED]

RE: OAKBRIDGE TERRACE AT
NORMANDY FARMS ESTATES
9000 TWIN SILO DRIVE
BLUE BELL, PA, 19422
LICENSE/COC#: 13898

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/06/2023 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: OAKBRIDGE TERRACE AT NORMANDY FARMS ESTATES **License #:** 13898 **License Expiration:** 07/17/2023
Address: 9000 TWIN SILO DRIVE, BLUE BELL, PA 19422
County: MONTGOMERY **Region:** SOUTHEAST

Administrator

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

Legal Entity

Name: ACTS RETIREMENT-LIFE COMMUNITIES INC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C 2 LP **Date:** 02/15/2000 **Issued By:** COPA

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 39 **Waking Staff:** 29

Inspection Information

Type: Full **Notice:** Unannounced **BHA Docket #:**
Reason: Renewal **Exit Conference Date:** 07/06/2023

Inspection Dates and Department Representative

07/06/2023 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information			
License Capacity: 58	Residents Served: 34		
Special Care Unit			
In Home: Yes	Area: Cranberry	Capacity: 12	Residents Served: 5
Hospice			
Current Residents: 0			
Number of Residents Who:			
Receive Supplemental Security Income: 0	Are 60 Years of Age or Older: 34		
Diagnosed with Mental Illness: 0	Diagnosed with Intellectual Disability: 0		
Have Mobility Need: 5	Have Physical Disability: 1		

Inspections / Reviews

07/06/2023 - Full		
Lead Inspector: [REDACTED]	Follow-Up Type: POC Submission	Follow-Up Date: 07/27/2023
07/28/2023 - POC Submission		
Submitted By: [REDACTED]	Date Submitted: 09/01/2023	
Reviewer: [REDACTED]	Follow-Up Type: POC Submission	Follow-Up Date: 08/02/2023

Inspections / Reviews (*continued*)

08/08/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/01/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 09/01/2023

09/05/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/01/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

85a Sanitary conditions

1. Requirements

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

Description of Violation

Resident #1 has two blister packs with [REDACTED] On 7/6/23, both cards were observed with two of the slots in the packs punctured and the medication taped inside.

Plan of Correction

Accept ([REDACTED] - 08/08/2023)

At time of survey the Director of Assisted Living and OBT staff nurse immediately destroyed [REDACTED] that was taped in the bubble pack of resident #1. Director of Assisted Living immediately inspected all bubble packs in the Blueberry, Huckleberry and Cranberry Medication carts for impaired foil integrity of any bubble packed medication. Director of Assisted Living completed an in-service on 7/17/2023 for Med Tech staff and Nursing staff on the Acts Policy for Narcotic Medications and instructed staff to not tape bubble packs if foil is penetrated. Director of Assisted Living created an audit sheet for checking the foil backing on bubble packed narcotic medications. Audit sheet was put into place on 7/28/2023. Staff Med Tech's to sign off on audit sheet when completing their shift to shift narcotic count. DAL or designee will review audit sheet weekly. This audit sheet to be completed each shift x 3 months and results of the audit reported to QAPI.

Licensee's Proposed Overall Completion Date: 08/01/2023

Implemented ([REDACTED] 09/05/2023)

132d Evacuation

2. Requirements

2800.
132.d. Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert. For purposes of this subsection, the fire safety expert may not be a staff person of the residence.

Description of Violation

The fire drill held 7/29/22 the residence had 41 residents present in the residence. The residence had 39 residents who evacuated in this fire drill. One resident did not evacuate due to covid-19. One resident slept through the drill. The residence did not hold another drill in the month of July 2022.

Plan of Correction

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

Fire Drill performed in OBT unit on July 13th, 2023, and all OBT residents did evacuate the unit. Director of Assisted Living reviewed with Director of Physical Plant Services the DHS regulations for Fire Drills and the Regulatory Compliance Guide for Fire Drills. Director of Physical Plant Services performed an in service with his maintenance team and fire safety experts and reviewed DHS Fire Drill regulations and Regulatory Compliance Guide for Fire Drills. Director of Assisted Living and/or Director of Physical Plant Services to review the monthly fire drills within 24 hours of being completed. If all residents do not evacuate then DAL to meet with resident to discuss DHS regulation to evacuate. An additional fire drill will be performed by maintenance team that same month so that all residents are evacuated.

Director of Assisted Living discussed and reviewed requirements for Fire Safety and Fire Drills with OBT residents during July's Resident Council Meeting. A copy of the OBT Fire Safety information was handed out to all OBT residents.

132d Evacuation (continued)

Fire Drills will be audited monthly x 6 months and Director of Physical Plant Services will report audit findings to QAPI.

Licensee's Proposed Overall Completion Date: 07/27/2023

Implemented [REDACTED] - 09/05/2023)