

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

November 1, 2023

[REDACTED], VICE PRESIDENT OF RESIDENTIAL SERVICES
HOLY REDEEMER HEALTH SYSTEM
[REDACTED]

RE: THE LAFAYETTE
8580 VERREE ROAD, 2ND&3RD
FLRS
PHILADELPHIA, PA, 19111
LICENSE/COC#: 10192

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/27/2023 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: THE LAFAYETTE License #: 10192 License Expiration: 07/16/2024
 Address: 8580 VERREE ROAD, 2ND&3RD FLRS, PHILADELPHIA, PA 19111
 County: PHILADELPHIA Region: SOUTHEAST

Administrator

Name: [REDACTED] Phone: [REDACTED]

Legal Entity

Name: HOLY REDEEMER HEALTH SYSTEM
 Address: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: Total Daily Staff: 46 Waking Staff: 35

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Monitoring Exit Conference Date: 09/27/2023

Inspection Dates and Department Representative

09/27/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 150 Residents Served: 46

Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:

Hospice
 Current Residents: x

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 45
 Diagnosed with Mental Illness: 1 Diagnosed with Intellectual Disability: 1
 Have Mobility Need: 0 Have Physical Disability: 1

Inspections / Reviews

09/27/2023 Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 10/16/2023

10/13/2023 - POC Submission

Submitted By: [REDACTED] Date Submitted: 10/16/2023
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 10/31/2023

Inspections / Reviews *(continued)*

11/01/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/16/2023

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

185a - Implement Storage Procedures

1. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident #1 is prescribed [redacted] cream as needed. On [redacted], this medication was not available in the home.

Plan of Correction

Accept [redacted] - 10/13/2023)

Nurse Manager conducted education of med-tech certified direct care staff and licensed practical nurses on 10/9/23 and 10/10/23 on procedures for reordering medications when needed. As an ongoing measure, an order will be created by the Nurse Manager on 10/13/2023 in the treatment administration record instructing staff to review resident medications to ensure there aren't any needing to be reordered. This new process will start on 10/19/2023 and will become a permanent part of the overnight staff shift duties.

Licensee's Proposed Overall Completion Date: 10/12/2023

Implemented [redacted] - 11/01/2023)

2. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident #2 is prescribed [redacted] twice a day at [redacted] and [redacted]. The resident's glucometer read [redacted] on [redacted] at [redacted] and [redacted] on [redacted] at [redacted] while the resident's September MAR read [redacted] and [redacted]

Resident #3 is prescribed [redacted] twice a day at [redacted] and [redacted]. The resident's September MAR read [redacted] at [redacted] on [redacted] and [redacted] at [redacted] on [redacted]. However, the resident's glucometer does not have a reading at either time.

Repeated Violation: 6/15/22

Plan of Correction

Accept [redacted] - 10/13/2023)

Nurse Manager conducted education of med-tech certified direct care staff and licensed practical nurses on 10/9/23 and 10/10/23 on procedures for completing glucometers readings and documenting them. As an ongoing measure, the Nurse Supervisor will complete a biweekly audit of the glucometer readings and documentation. This new process will start on 10/13/2023 and will become a permanent part of the Nurse Supervisor duties.

Licensee's Proposed Overall Completion Date: 10/12/2023

Implemented [redacted] - 11/01/2023)

187d - Follow Prescriber's Orders

3. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

187d - Follow Prescriber's Orders (continued)

Description of Violation

Resident #3 is prescribed [redacted] twice a day at [redacted] and [redacted]. However, the resident's blood sugar was not checked on [redacted] at [redacted], and on [redacted] at [redacted].

Plan of Correction

Accept ([redacted] - 10/13/2023)

Nurse Manager conducted education of med-tech certified direct care staff and licensed practical nurses on 10/9/23 and 10/10/23 on procedures for completing glucometers readings and documenting them. As an ongoing measure, the Nurse Supervisor will complete a biweekly audit of the glucometer readings and documentation. This new process will start on 10/13/2023 and will become a permanent part of the Nurse Supervisor duties.

Licensee's Proposed Overall Completion Date: 10/12/2023

Implemented ([redacted] - 11/01/2023)