

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

November 17, 2023

[REDACTED], EXECUTIVE DIRECTOR
LEGACY AT BRISTOL INC
[REDACTED]

RE: LEGACY GARDENS OF BRISTOL
2022 BATH ROAD
BRISTOL, PA, 19007
LICENSE/COC#: 13108

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/28/2023 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: LEGACY GARDENS OF BRISTOL License #: 13108 License Expiration: 02/13/2024
 Address: 2022 BATH ROAD, BRISTOL, PA 19007
 County: BUCKS Region: SOUTHEAST

Administrator

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

Legal Entity

Name: LEGACY AT BRISTOL INC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 12/08/1997 Issued By: Dept. of Licensing and Inspections
 Type: I-2 Date: 08/18/2010 Issued By: Bristol Township

Staffing Hours

Resident Support Staff: Total Daily Staff: 28 Waking Staff: 21

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Incident Exit Conference Date: 09/28/2023

Inspection Dates and Department Representative

09/28/2023 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 26 Residents Served: 25
 Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:
 Hospice
 Current Residents: 5
 Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 25
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 3 Have Physical Disability: 3

Inspections / Reviews

09/28/2023 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 10/22/2023

Inspections / Reviews (*continued*)

11/09/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/11/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 11/17/2023

11/17/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/11/2023

Reviewer: [REDACTED]

Follow Up Type: Not Required

65e - 12 Hours Annual Training

1. Requirements

2600.

65.e. Direct care staff persons shall have at least 12 hours of annual training relating to their job duties.

Description of Violation

The home's records showed no annual training for direct care staff person A in 2022 or 2023.

Plan of Correction

Accept ([REDACTED] - 11/09/2023)

In response to the violation on 09/28/2023 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken:

- 1. on 09/29/2023 the Administrator added staff person A to the training tracker form.*
- 2. on 10/06/2023 the Administrator added staff person A trainings to the training tracker using training quizzes proving completion.*

To enhance the currently compliant operations:

- 1. on 09/29/2023 the Administrator checked the training tracker to make sure no other staff persons were missing, with a completion date of 09/29/2023.*
- 2. on 10/13/2023 the Administrator updated the New Hire checklist form to include the need to add any new staff person to the training tracker, with a completion date of 10/13/2023.*
- 3. on 10/13/2023 the Administrator added staff person A to the training tracker upon hire, with a completion date of 10/13/2023.*

The overall completion date is 10/13/2023.

Effective 10/13/2023 the Administrator will perform quarterly audit of the training tracker to verify all staff are accounted for and to inform staff of any missed trainings through 12/31/2023, in order to maintain ongoing compliance with ensuring direct care staff persons have at least 12 hours of annual training relating to their job duties. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 10/13/2023

Implemented ([REDACTED] - 11/17/2023)

65g - Annual Training Content

2. Requirements

2600.

65.g. Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:

1. Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert. Videos prepared by a fire safety expert are acceptable for the training if accompanied by an onsite staff person trained by a fire safety expert.
2. Emergency preparedness procedures and recognition and response to crises and emergency situations.
3. Resident rights.
4. The Older Adult Protective Services Act (35 P.S. § § 10225.101—10225.5102).
5. Falls and accident prevention.
6. New population groups that are being served at the home that were not previously served, if applicable.

65g Annual Training Content (continued)

Description of Violation

According to the home's records, direct care staff person A did not receive training in fire safety, emergency preparedness, resident rights, The Older Adult Protective Services Act, falls and accident prevention, and new population groups during training year 2022 or 2023.

Plan of Correction

Accept ([redacted] - 11/09/2023)

In response to the violation on 10/13/2023 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 10/13/2023 by the Director to find the root cause of this violation. It was that staff person A was hired 4/24/2022, worked until 7/8/2021 when she took several weeks off due to illness. She was termed 9/13/2021 when her illness was diagnosed as a high risk pregnancy. She was rehired on 5/24/2023. Therefore, she was not an employee in 2022. Her current training is ongoing but will be attached as documentation when the POC is approved. Our fire safety training is scheduled for Oct. 24,2023.

To enhance the currently compliant operations:

- 1. on 10/13/2023 and ongoing, the Director will ,as stated in the previous violation, update the New Hire Checklist to include any new staff person to the Training tracker upon hire, with a completion date of 10/1/2023

The overall completion date is 10/16/2023.

Effective 10/13/23 the director will perform quarterly audits through Dec 31,2023 to maintain ongoing compliance . Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date:

Implemented [redacted] - 11/17/2023)

185a - Implement Storage Procedures

3. 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

On [redacted] at [redacted], the home's narcotic log showed there were 28 remaining [redacted] prescribed to resident #1. However, there were 29 pills remaining.

Plan of Correction

Accept [redacted] - 11/09/2023)

In response to the violation on 10/13/2023 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 10/06/2023 by the NURSE. THE DOUBLE SECURITY CABINET WILL REMAIN LOCKED AT ALL TIMES, UNLESS GIVING MEDS, NURSE AND ALL MED TECHS HAVE ONLY ACCESS TO THIS AREA.

To enhance the currently compliant operations:

- 1. on 10/06/2023THE RN AND MED TECHS WILL MONITOR MED LOG BOOK, FOR 3 MONTHS OF OCTOBER, NOVEMBER, AND DECEMBER, FOR ACCURACY AT THE BEGINNING AND END OF EACH SHIFT. 2 PEOPLE WILL BE PRESENT, with a completion date of 12/31/2023.
- 2. on the10/13/2023 the RN will KEEP A LOG SHEET FOR THE MONTHS OF OCTOBER NOVEMBER AND

185a Implement Storage Procedures (continued)

DECEMBER FOR 3 MONTH MONITORING. with a completion date of 12/31/2023

- 3. on 10/13/23 the RN WILL INCLUDE DOCUMENTATION OF DESTROYED EXTRA LORAZEPAM BY TWO AUTHORIZED PERSONNEL IMMEDIATELY, AND ON GOING, with a completion date of 10/13/23.

The overall completion date is 12/31/2023.

Effective [] the [] will perform [] [] through [] to maintain ongoing compliance with [] Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 10/13/2023

Implemented [] - 11/17/2023)

187a - Medication Record

4. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

- 12. Diagnosis or purpose for the medication, including pro re nata (PRN).

Description of Violation

Resident #1 is prescribed [REDACTED]. However, the resident's medication administration record does not indicate the purposes or diagnoses for these medications.

Plan of Correction

Accept [] - 11/09/2023)

In response to the violation on 10/13/2023 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken:

- 1. on 10/06/2023 the RN IMMEDIATELY CALLED THE FACILITY PHARMACY TO ENSURE THAT EACH MEDICINE WILL CONTAIN A REASON OR DIAGNOSE for EACH AND EVERY MED. THIS RN CALLED THE PHARMACY TO PLEASE PUT DIAGNOSIS FOR EACH AND EVERY MEDICATION. DIAGNOSIS will BE FOUND EITHER ON THE PROFILE SHEET OR MARS OR BOTH.
- 2. on 10/06/2023 THIS RN WILL REVIEW EACH OF THE RESIDENTS MARS FOR ACCURACY, ENSURING THERE IS A DIAGNOSIS OR REASON FOR EACH MED.
- 3. on 10/06/2023 THIS RN WILL MONITOR THIS ISSUE FOR 3 MONTHS.

Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 10/13/2023

Implemented [] - 11/17/2023)