

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

February 7, 2024

[REDACTED]
OXFORD PERSONAL CARE LLC
[REDACTED]
[REDACTED]

RE: OXFORD CROSSINGS
310 EAST WINCHESTER AVENUE
LANGHORNE, PA, 19047
LICENSE/COC#: 14858

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/30/2023 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: OXFORD CROSSINGS License #: 14858 License Expiration: 02/16/2024
Address: 310 EAST WINCHESTER AVENUE, LANGHORNE, PA 19047
County: BUCKS Region: SOUTHEAST

Administrator

Name: Jennifer Simmers Phone: 610-657-0286 Email: jsimmers@oxfordenhancedsl.com

Legal Entity

Name: OXFORD PERSONAL CARE LLC
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-1 Date: 11/22/1985 Issued By: Commonwealth of Pennsylvania
Type: I-2 Date: 11/22/1985 Issued By: Township of Middleton

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 100 Waking Staff: 75

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint, Incident Exit Conference Date: 11/30/2023

Inspection Dates and Department Representative

11/30/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 116 Residents Served: 69

Secured Dementia Care Unit

In Home: Yes Area: Memory Care Unit Capacity: 27 Residents Served: 17

Hospice

Current Residents: 6

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 69
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 1
Have Mobility Need: 31 Have Physical Disability: 2

Inspections / Reviews

11/30/2023 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 12/31/2023

Inspections / Reviews (*continued*)

01/04/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/24/2024

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 01/09/2024

01/09/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/24/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 02/09/2024

02/07/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/24/2024

Reviewer: [REDACTED]

Follow-Up Type: Not Required

42c - Treatment of Residents

1. Requirements

2600.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

Resident [redacted] family utilized a hidden camera located in resident [redacted] room. On [redacted] at [redacted], video and audio recordings capture Staff A was assisting resident [redacted] with dressing. As the staff was pulling up the pants of the resident, they state to the resident, the resident states something unintelligible, to which staff replies "Pull it up yourself then, pull them up, pull your underwear up. Ok, guess what...they'll stay like that all night, because you can pull them up. Pull your underwear up so your [redacted] can sleep. Stop being a..." and then the staff grunted. I'm not going to do this. I'm getting ready to go back downstairs and watch [something unintelligible]."

At approximately [redacted], resident [redacted], diagnosed with a hearing impairment and was asking for assistance while lying in bed. When staff person A arrived, they harshly asked the resident "Why are you yelling? I heard you four times". The resident communicated that [redacted] did not have [redacted] pendant. Staff person A was observed pulling the cover away from resident [redacted] and stating "It's right next to you in the bed." and then mumbling something unintelligible. Resident [redacted] asked the staff to hand [redacted] the pendant. Staff person A replied "No I cannot, you can feel the bed for it." and as the staff was walking out of the room said "You're not a 5 year old." The resident replied "I am not stupid."

At [redacted], the staff returns to resident [redacted] room and states "You are not the only person on this floor, can you have a little respect? What are you screaming for?.....Hello?" The resident replied "I have to urinate". Staff A responded "Well get up out of bed, get up, get up, come on. You're full of it...and I know it. But you know what, now you can get up and you can walk to the bathroom...Walk to the bathroom, come on, get up." As the staff attempts to assist the resident in rising, the staff person says "You will hurt yourself and I'm not going to hurt myself...I promise you that." and demands the resident sit up. As the resident continues to reach toward the staff for assistance, the staff person says "I'm gonna let you sit right there and piss yourself. You are not going to hurt my back." The resident was able to rise. Staff Person A instructs the resident to start moving forward and says "I'm not going to hurt myself trying to save you." The resident replied "I don't want to fall". Staff responded curtly "Start moving forward then."

Plan of Correction

Accept [redacted] - 01/09/2024)

Staff A was suspended pending investigation and ultimately terminated on [redacted]
Education on Resident Rights will be completed by the Wellness Director or designee with direct care staff, nurses and medication technicians by 1/11/24

Executive Director or designee will do a weekly audit of random residents starting on 1/2/24. Audits will be completed for 4 weeks to ensure residents are treated with dignity and respect. Audits will be submitted and presented by the Executive Director or designee to the QAPI committee for review and recommendation for monthly meeting scheduled on 2/7/24.

Proposed Overall Completion Date: 01/11/2024

Licensee's Proposed Overall Completion Date: 01/11/2024

Implemented [redacted] - 02/07/2024)

51 - Criminal Background Check

2. Requirements

2600.

51. Criminal History Checks - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Description of Violation

On [REDACTED], resident [REDACTED] employed a private caregiver that has been working in the home since the resident's admission of [REDACTED]. The home was unaware of this caregiver's presence and did not have a criminal background check on file in the home.

Repeated Violation: 6/6/23 et al

Plan of Correction

Accept [REDACTED] - 01/09/2024)

On [REDACTED] resident [REDACTED] designee was notified by the Wellness Director that the identified private caregiver is required to have a background check on file prior to completing work in the community.

On [REDACTED] resident [REDACTED] caregiver was provided background check authorization form for completion by the Wellness Director. Background check was submitted to Applicantsafe on 1/5/24 by the Human Resources Director which is currently pending results.

On 12/26/23 Wellness Director completed sweep of current residents to determine any additional private caregivers.

On 1/4/23 Wellness Director provided background check authorization form to one additional identified private caregiver. Background check authorization form was submitted via Applicantsafe by the Human Resources Director on 1/5/23 and is pending results.

New policy on Private Caregivers was created by the Executive Director on 12/27/23, requiring compliance with 51 – Criminal History Checks. As per policy states, failure to comply will result in discontinued use of private caregiver and/or a 30 day discharge notice. Residents were notified by the Life Enrichment Director on 1/3/23 at Resident Council of policy update. Families were notified by Executive Director on 1/5/23 via Voicefriend of updated policy. Future residents and families will be notified of policy during the move in process by Sales Director or Designee. New Move-Ins will be audited starting 1/2/23 by the Executive Director or designee for compliance with the Private Caregiver policy. Audits will be performed weekly for 4 weeks. Audits will be submitted and presented by the Executive Director or designee to the QAPI committee for review and recommendation for monthly meeting scheduled on 2/7/24.

Proposed Overall Completion Date: 01/11/2024

Licensee's Proposed Overall Completion Date: 01/11/2024

Implemented [REDACTED] - 02/07/2024)