

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

February 23, 2024

[REDACTED]  
ANNS CHOICE INC  
[REDACTED]

RE: ANN'S CHOICE  
16000 ANN'S CHOICE WAY  
WARMINSTER, PA, 18974  
LICENSE/COC#: 12901

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/04/2024 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: ANN'S CHOICE License #: 12901 License Expiration: 07/22/2024  
 Address: 16000 ANN'S CHOICE WAY, WARMINSTER, PA 18974  
 County: BUCKS Region: SOUTHEAST

## Administrator

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

## Legal Entity

Name: ANNS CHOICE INC  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

## Certificate(s) of Occupancy

Type: I-2 Date: 11/19/2018 Issued By: Warminster Township, L&I

## Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 91 Waking Staff: 68

## Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:  
 Reason: Complaint Exit Conference Date: 01/04/2024

## Inspection Dates and Department Representative

01/04/2024 - On-Site: [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

License Capacity: 65 Residents Served: 55

## Secured Dementia Care Unit

In Home: Yes Area: Memory Care Capacity: 55 Residents Served: 44

## Hospice

Current Residents: 5

## Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 55  
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 36 Have Physical Disability: 0

## Inspections / Reviews

## 01/04/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 01/22/2024

## 01/22/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: 02/23/2024  
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 02/24/2024

Inspections / Reviews *(continued)*

02/23/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/23/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

## 141a 1-10 Medical Evaluation Information

## 1. Requirements

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:

1. A general physical examination by a physician, physician's assistant or nurse practitioner.
2. Medical diagnosis including physical or mental disabilities of the resident, if any.
3. Medical information pertinent to diagnosis and treatment in case of an emergency.
4. Special health or dietary needs of the resident.
5. Allergies.
6. Immunization history.
7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
8. Body positioning and movement stimulation for residents, if appropriate.
9. Health status.
10. Mobility assessment, updated annually or at the Department's request.

## Description of Violation

Resident [REDACTED] medical evaluation, dated [REDACTED] is incomplete. Several areas of the form are blank including section (1) general physical examination information and section (4) regarding dietary needs of the resident.

## Plan of Correction

Accept [REDACTED] - 01/22/2024)

Personal Care Residents will have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission, and annually.

## Correction:

Resident [REDACTED] will have an updated and complete DME by [REDACTED] that includes information on physical examination and special dietary needs.

## How it will be prevented from occurring again:

PC administrator completed audit of all Memory Care DMEs on [REDACTED]. All needed corrections will be completed by [REDACTED].

Audit of PC DMEs will be completed by PC Administrator by [REDACTED]. Any needed corrections will be completed by [REDACTED].

All PC/Memory Care managers will be educated on proper completion of the DME and how to review the form for completion, including Section 1. "General physical examination information" and Section 4. "Regarding dietary needs of the resident." This education will be a collaborative effort with medical provider(s) and DON and shall be completed by [REDACTED].

## Monitoring:

Starting the week of [REDACTED], all new DMEs will be audited by PC Administrator or designee on weekly basis x 8 weeks to ensure DME documentation has been completed. Results shall be submitted to QAPI monthly beginning in February for 2 months.

Proposed Overall Completion Date: 04/15/2024

Licensee's Proposed Overall Completion Date: 04/15/2024

141a 1-10 Medical Evaluation Information (continued)

Implemented [REDACTED] - 02/23/2024)

141b1 - Annual Medical Evaluation

2. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident [REDACTED] most recent medical evaluation was completed on [REDACTED]. The resident's previous medical evaluation was completed on [REDACTED].

Plan of Correction

Accept [REDACTED] - 01/22/2024)

Correction:

Resident [REDACTED] will have an updated and complete DME by [REDACTED]

How it will be prevented from occurring again.

Audit of all MC resident DMEs was completed by PC administrator on [REDACTED]. Last completion date of all DMEs identified. Overdue DMEs will be initiated by Memory Care and PC Managers for completion. PC administrator or designee will verify completion by [REDACTED].

Audit of PC DMEs will be completed by PC Administrator by [REDACTED]. Any needed corrections will be completed by [REDACTED].

Beginning with DMEs due [REDACTED], Memory Care and PC Managers will initiate DMEs for completion. At the end of each month, Memory Care Manager and/or PC Manager will review DME's that are due within the next month, Memory Care and/or PC manager will initiate DME forms and verify completion of medical information by the due date.

Monitoring:

Starting the week of [REDACTED], all new DMEs will be audited by PC Administrator or designee on weekly basis x 8 weeks to ensure DME documentation has been completed. Results shall be submitted to QAPI monthly beginning in February for 2 months.

Proposed Overall Completion Date: 04/12/2024

Licensee's Proposed Overall Completion Date: 04/12/2024

Implemented [REDACTED] 02/23/2024)