

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

March 1, 2024

[REDACTED]
CSH EXTON LESSEE LLC
[REDACTED]
[REDACTED]

RE: ARBOR TERRACE EXTON
100 OAKLANDS BOULEVARD
EXTON, PA, 19341
LICENSE/COC#: 14793

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/23/2024 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: *ARBOR TERRACE EXTON* License #: *14793* License Expiration: *07/27/2024*
 Address: *100 OAKLANDS BOULEVARD, EXTON, PA 19341*
 County: *CHESTER* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *CSH EXTON LESSEE LLC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-1* Date: *01/11/2021* Issued By: *West Whiteland Township*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *120* Waking Staff: *90*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint* Exit Conference Date: *01/23/2024*

Inspection Dates and Department Representative

01/23/2024 - On-Site: Evelyn Perez

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *99* Residents Served: *90*

Secured Dementia Care Unit
 In Home: *Yes* Area: *Memory Care* Capacity: *32* Residents Served: *26*

Hospice
 Current Residents: *8*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *90*
 Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *30* Have Physical Disability: *0*

Inspections / Reviews

01/23/2024 - Partial
 Lead Inspector: *Evelyn Perez* Follow-Up Type: *POC Submission* Follow-Up Date: *02/10/2024*

Inspections / Reviews *(continued)*

02/09/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/29/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 02/20/2024

03/01/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/29/2024

Reviewer: [REDACTED]

Follow-Up Type: Not Required

42v - Resident-Home Contract

1. Requirements

2600.

42.v. A resident has the right to receive services contracted for in the resident-home contract.

Description of Violation

Based on the interviews since [redacted] to present, the home failed to provide heating to the residents in the dining room, as contracted for in the resident-home contract. They also failed to provide heating to resident 1 for at least two weeks as contracted for in the resident-home contract.

Plan of Correction

Accept [redacted] 02/09/2024)

- Upon the Department's findings of the stated citation in violation of 2600.42.v, the vendor fixed the VRF compressor issue in the dining room and the heating issue in Apartment [redacted] on [redacted].
- BOD contacted Chester County Department of Emergency Services on 1/24/2024, for any assistance they would be able to provide.
- MD, Administrator or designee will request quarterly service checks from our heating and cooling vendor to provide routine maintenance on all aspects of our system. MD or designee will check the temperature in the community on the first week of every month starting 2/1/2024 for the next six months.
- Going forward, the MD, Administrator or designee will work with our contracted Preventative Maintenance HVAC vendor monthly with a focus on preventative maintenance to ensure the system is in full working order.

Proposed Overall Completion Date: 03/01/2024

Licensee's Proposed Overall Completion Date: 03/01/2024

Implemented [redacted] - 03/01/2024)

83a - Indoor Temperature

2. Requirements

2600.

83.a. The indoor temperature, in areas used by the residents, must be at least 70°F when residents are present in the home.

Description of Violation

According to interviews with residents and staff, the dining room area on the first floor utilized by the residents was colder than 62 degrees Fahrenheit.

The heating system in Resident [redacted] apartment has been broken for a couple weeks. The resident was given the option to sleep in a different room but not to move entirely until the issue was resolved. The thermostat was entirely off, making it impossible to check the temperature of the unit.

Plan of Correction

Accept [redacted] - 02/09/2024)

- Upon the Department's findings of the stated citation in violation of 83A, the resident was immediately and entirely relocated to a different room until her apartment unit heating issue was fixed. The heating unit was fixed on 1/29/24. The dining room was shut down and all meals moved to the third floor and served in our Tavern Sports Lounge.
- BOD contacted Chester County Department of Emergency Services on 1/24/2024 for any assistance they would be able to provide.

83a - Indoor Temperature (continued)

- MD, Administrator or designee will request quarterly service checks from our heating and cooling vendor to provide routine maintenance on all aspects of our system. MD or designee will check the temperature in the community on the first week of every month starting 2/1/2024 for the next six months.
- Going forward, the MD, Administrator or designee will work with our contracted Preventative Maintenance HVAC vendor monthly with a focus on preventative maintenance to ensure the system is in full working order.

Proposed Overall Completion Date: 03/01/2024

Licensee's Proposed Overall Completion Date: 03/01/2024

Implemented [REDACTED] - 03/01/2024)

84 - Heat Sources**3. Requirements**

2600.

84. Heat Sources - Heat sources, such as steam and hot heating pipes, water pipes, fixed space heaters, hot water heaters and radiators exceeding 120° F that are accessible to the resident must be equipped with protective guards or insulation to prevent the resident from coming in contact with the heat source.

Description of Violation

On [REDACTED], at [REDACTED], there were 3 portable space heaters, one at the main entrance of the home and two in the first-floor dining room. Two of the portable space heaters have metal guards. However, the metal guards were positioned at the top of the portable space heaters, leaving the bottom of the portable space heaters with no protective guards in place to prevent residents from coming into contact with the portable space heaters.

Plan of Correction

Accepted [REDACTED] - 02/09/2024)

- Upon the Department's findings of the stated citation in violation of 2600.84, the MD removed all space heaters from the property.
- BOD contacted Chester County Department of Emergency Services for any assistance they would be able to provide.
- The MD or designee will perform a onetime audit of the community ensuring that no portable heaters have been brought in by families or staff. Audit will be completed by 2/19/2024.
- Moving forward, The MD or designee will make monthly routine audits of the community to ensure that space heaters are not being used.

Proposed Overall Completion Date: 03/01/2024

Licensee's Proposed Overall Completion Date: 03/01/2024

Implemented [REDACTED] - 03/01/2024)

88a - Surfaces**4. Requirements**

2600.

- 88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

88a - Surfaces (continued)

Description of Violation

On [REDACTED], there was a portable space heater in the dining room on the first floor. It was placed in the space between the dining room tables, close to a resident walker, which could present a trip risk and make it uncomfortable for the resident to stand or sit.

Plan of Correction

Accept [REDACTED] - 02/09/2024)

- Upon the Department's findings of the stated citation in violation of 2600.88a, the MD removed all space heaters from the property.
- The MD or designee will perform a onetime audit of the community ensuring that no portable heaters have been brought in by families or staff. Audit will be completed by 2/19/2024.
- Moving forward, The MD or designee will make monthly routine audits of the community to ensure that space heaters are not being used.

Proposed Overall Completion Date: 03/01/2024

Licensee's Proposed Overall Completion Date: 03/01/2024

Implemented [REDACTED] 03/01/2024)

121a - Unobstructed Egress

5. Requirements

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

According to interviews, on [REDACTED] bedroom [REDACTED] had portable space heaters that were obstructing the bedroom doorway and the living room hallway, which led to the apartment's main entrance.

Plan of Correction

Accept [REDACTED] - 02/09/2024)

- Upon the Department's findings of the stated citation in violation of 2600.121a, the MD removed all space heaters from the property.
- The MD or designee will perform a onetime audit of the community ensuring that no portable heaters have been brought in by families or staff. Audit will be completed by 2/19/2024.
- Moving forward, The MD or designee will make monthly routine audits of the community to ensure that space heaters are not being used.

Licensee's Proposed Overall Completion Date: 03/01/2024

Implemented [REDACTED] - 03/01/2024)

127a - Portable Space Heaters

6. Requirements

2600.

127a - Portable Space Heaters (continued)

127.a. Portable space heaters are prohibited.

Description of Violation

On [REDACTED], there were five portable space heaters in use in the facility: one at the main entrance, two in the dining room, and two in bedroom [REDACTED].

Plan of Correction

Accept [REDACTED] - 02/09/2024)

- Upon the Department's findings of the stated citation in violation of 2600.127a, the MD removed all space heaters from the property.
- The MD or designee will perform a onetime audit of the community ensuring that no portable heaters have been brought in by families or staff. Audit to be completed by 2/19/2024.
- Moving forward, The MD or designee will make monthly routine audits of the community to ensure that space heaters are not being used.

Licensee's Proposed Overall Completion Date: 03/01/2024

Implemented [REDACTED] - 03/01/2024)

141a 1-10 Medical Evaluation Information

7. 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] did not include the medical information pertinent to diagnosis and treatment in case of an emergency and allergies.

Resident [REDACTED] medical evaluation dated [REDACTED] did not include the medical information pertinent to diagnosis and treatment in case of an emergency.

Plan of Correction

Accept [REDACTED] - 02/09/2024)

- Upon the Department's findings of the stated citation in violation of 2600.141a 1-10, the RCD and MCD conducted an audit on [REDACTED] of all resident medical charts to include medical information pertinent to diagnosis and treatment in case of an emergency and allergies.

141a 1-10 Medical Evaluation Information (continued)

- The RCD, MCD or designee to perform an additional audit during the weeks of [REDACTED] of all resident medical evaluation to include the medical information pertinent to diagnosis and treatment in case of an emergency and allergies.
- Going forward, the RCD, MCD or designee will perform a quarterly audit of resident medical evaluation to ensure that include the medical information pertinent to diagnosis and treatment in case of an emergency and allergies.

Licensee's Proposed Overall Completion Date: 03/01/2024

Implemented [REDACTED] - 03/01/2024)