

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

March 1, 2024

[REDACTED], EXECUTIVE DIRECTOR
ARHC WHWCHPA01 TRS LLC
1361 EAST BOOT ROAD
EXECUTIVE DIRECTOR
WEST CHESTER, PA, 19380

RE: WELLINGTON COURT AT HERSHEY'S
MILL
1361 EAST BOOT ROAD
WEST CHESTER, PA, 19380
LICENSE/COC#: 14136

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/31/2024 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: WELLINGTON COURT AT HERSHEY'S MILL **License #:** 14136 **License Expiration:** 03/23/2024
Address: 1361 EAST BOOT ROAD, WEST CHESTER, PA 19380
County: CHESTER **Region:** SOUTHEAST

Administrator

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

Legal Entity

Name: ARHC WHWCHPA01 TRS LLC
Address: 1361 EAST BOOT ROAD, EXECUTIVE DIRECTOR, WEST CHESTER, PA, 19380
Phone: [REDACTED] [REDACTED] [REDACTED]

Certificate(s) of Occupancy

Type: Other **Date:** 02/15/2015 **Issued By:** East Goshen Township

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 122 **Waking Staff:** 92

Inspection Information

Type: Full **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint, Incident **Exit Conference Date:** 01/31/2024

Inspection Dates and Department Representative

01/31/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 114 **Residents Served:** 74

Secured Dementia Care Unit

In Home: Yes **Area:** Dementia Unit **Capacity:** 36 **Residents Served:** 23

Hospice

Current Residents: 2

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 74
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 48 **Have Physical Disability:** 0

Inspections / Reviews

01/31/2024 Full

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 02/22/2024

02/22/2024 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 03/01/2024
Reviewer: [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 03/01/2024

Inspections / Reviews *(continued)*

03/01/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/01/2024

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

Plan of Correction

Accept [REDACTED] 02/22/2024)

Health and Wellness director will receive training by the executive director on D.M.E. expectations by 2.29.24. The Health and Wellness Director or designee will then invoice the clinical staff. The Executive Director will discuss the D.M.E. expectations with the leadership team and will be reviewed at QA meetings for 3 months starting with March 2024.

Licensee's Proposed Overall Completion Date: 02/29/2024

Implemented ([REDACTED] - 03/01/2024)

224a - Preadmission Screen Form

2. Requirements

2600.

224.a. A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

Description of Violation

Resident 1's preadmission screening form, dated [REDACTED], does not include a determination that the needs of the resident can be met by the services provided by the home.

Resident 2's preadmission screening form, dated [REDACTED], does not include a determination that the needs of the resident can be met by the services provided by the home.

Plan of Correction

Accept [REDACTED] - 02/22/2024)

Health and Wellness Director and Memory Care Director will be in-serviced by the Executive Director on PA regulation 2600.224a regarding pre-admission screening forms by 02.29.24. Health and Wellness Director or designee will then in-service clinical team. H.W.D. or designee will audit of all pre-admission screening and will have audit of entire community completed by 02.29.24 and report any discrepancies to the Executive Director.

224a Preadmission Screen Form (continued)

Proposed Overall Completion Date: 02/29/2024

Licensee's Proposed Overall Completion Date: 02/29/2024

Implemented () - 03/01/2024)

227d - Support Plan Medical/Dental

3. Requirements

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

The assessment for resident 1, dated [REDACTED], indicates the resident needs a service on aggression, agitation, and writing correspondence. The resident's support plan, dated [REDACTED], does not document how this need will be met.

The assessment for resident 2, dated [REDACTED], indicates the resident needs a service on irritability, agitation, aggression, using the telephone, making and keeping appointments, caring for personal possessions, writing correspondence, obtaining clean and seasonal clothing, The resident's support plan, dated [REDACTED], does not document how this need will be met.

Repeat Violation 11/08/2023

Plan of Correction

Accept () - 02/22/2024)

Resident #1 is no longer a resident of the community. Resident #2 their support plan will be reviewed and updated by health and wellness director or designee by [REDACTED] Health and Wellness director or designee will in service all memory care direct staff on resident #2's support plan by [REDACTED] Health and Wellness director or designee will perform audits on all current resident support plans to ensure PA reg 2600.227d is followed with a completion date of 02.29.24. Health and Wellness director or designee will perform 10% quarterly audits on going. Results of the audits will be discussed with the Executive Director.

Licensee's Proposed Overall Completion Date: 02/29/2024

Implemented () - 03/01/2024)

231c - Preadmission Screening

4. Requirements

2600.

231.c. A written cognitive preadmission screening completed in collaboration with a physician or a geriatric assessment team and documented on the Department's preadmission screening form shall be completed for each resident within 72 hours prior to admission to a secured dementia care unit.

Description of Violation

Resident 2 was admitted to the Secure Dementia Care Unit (SDCU) on [REDACTED]. However, resident 2's medical assessment and support plan were completed on [REDACTED].

Plan of Correction

Accept () - 02/22/2024)

Resident number #2 [REDACTED] preadmission was completed in time of admission to secured memory

231c Preadmission Screening (continued)

care unit. completed on [REDACTED] • Resident # 2 medical assessment was completed in the 15 day admission per state reg 2600. 231c. Completed assessment was misfiled please see attached one with signature and date from POA. Health and Wellness director or designee will in service current staff on proper prescreening admission by [REDACTED]

Licensee's Proposed Overall Completion Date: 02/29/2024

Implemented ([REDACTED] - 03/01/2024)

252 - Record Content**5. Requirements**

2600.

252. Content of Resident Records - Each resident's record must include the following information:

1. Name, gender, admission date, birth date and Social Security number.
2. Race, height, weight, color of hair, color of eyes, religious affiliation, if any, and identifying marks.
3. A photograph of the resident that is no more than 2 years old.
4. Language or means of communication spoken or used by the resident.
5. The name, address, telephone number and relationship of a designated person to be contacted in case of an emergency.
6. The name, address and telephone number of the resident's physician or source of health care.
7. The current and previous 2 years' physician's examination reports, including copies of the medical evaluation forms.
8. A list of prescribed medications, OTC medications and CAM.
9. Dietary restrictions.
10. A record of incident reports for the individual resident.
11. A list of allergies.
12. The documentation of health care services and orders, including orders for the services of visiting nurse or home health agencies.
13. The preadmission screening, initial intake assessment and the most current version of the annual assessment.
14. A support plan.
15. Applicable court order, if any.
16. The resident's medical insurance information.
17. The date of entrance into the home, relocations and discharges, including the transfer of the resident to other homes owned by the same legal entity.
18. An inventory of the resident's personal property as voluntarily declared by the resident upon admission and voluntarily updated.
19. An inventory of the resident's property entrusted to the administrator for safekeeping.
20. The financial records of residents receiving assistance with financial management.
21. The reason for termination of services or transfer of the resident, the date of transfer and the destination.
22. Copies of transfer and discharge summaries from hospitals, if available.
23. If the resident dies in the home, a copy of the official death certificate.
24. Signed notification of rights, grievance procedures and applicable consent to treatment protections specified in § 2600.41 (relating to notification of rights and complaint procedures).
25. A copy of the resident-home contract.
26. A termination notice, if any.

Description of Violation

Resident 1's and 2's records do not include a record of incident reports for the individual resident.

Plan of Correction

Accept ([REDACTED] - 02/22/2024)

Resident #1 is no longer a resident of this community. Resident #2 has been indentified and records of state reportables were located in a separate binder. All records will be filed and a copy will be in the resident charts by

252 - Record Content (continued)

02.29.24. Health and Wellness Director and memory care director will be in-serviced by executive director on PA regulation 2600.252 by 02.29.27. Reportable incidents will be discussed at weekly "at risk" meeting with the Health and Wellness director and the Executive Director or designee and a copy placed in the resident clinical chart.

Licensee's Proposed Overall Completion Date: 02/29/2024

Implemented [REDACTED] - 03/01/2024)