

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

April 23, 2024

[REDACTED]
ACTS RETIREMENT - LIFE COMMUNITIES INC
[REDACTED]

RE: OAKBRIDGE TERRACE AT LIMA
ESTATES
411 N. MIDDLETOWN ROAD
MEDIA, PA, 19063
LICENSE/COC#: 13891

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/26/2024 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: OAKBRIDGE TERRACE AT LIMA ESTATES License #: 13891 License Expiration: 05/21/2024
 Address: 411 N. MIDDLETOWN ROAD, MEDIA, PA 19063
 County: DELAWARE Region: SOUTHEAST

Administrator

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

Legal Entity

Name: ACTS RETIREMENT - LIFE COMMUNITIES INC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 08/15/1990 Issued By: COPA L & I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 30 Waking Staff: 23

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Monitoring Exit Conference Date: 02/26/2024

Inspection Dates and Department Representative

02/26/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 36 Residents Served: 30
 Special Care Unit
 In Home: No Area: Capacity: Residents Served:
 Hospice
 Current Residents: 0
 Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 30
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

02/26/2024 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 03/15/2024

03/11/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 04/05/2024
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 04/05/2024

Inspections / Reviews (*continued*)

04/23/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/05/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

183d Current medications

1. Requirements

2800.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the residence.

Description of Violation

On [redacted], [redacted] every 6 hours, prescribed for resident [redacted], was in the residence's Medication Cart; however, there was not a current order for this medication.

Plan of Correction

Accept [redacted] - 03/11/2024)

Administrator inserviced direct care staff on [redacted] regarding the disposal of medications that have been discontinued. Administrator or designee to perform an initial medication cart audit to be completed by 3/22/24. Beginning 3/25/24, nurses and/or med techs to perform weekly medication cart audits x 12, then monthly thereafter, to ensure discontinued medications are promptly removed from the medication cart. The results of the audits will be presented to the quarterly QAPI committee. The POC will be reviewed at the next QAPI meeting and ongoing monitoring for compliance will be reported to the QAPI committee.

Licensee's Proposed Overall Completion Date: 03/25/2024

Implemented [redacted] - 04/11/2024)

183e Storing Medications

2. Requirements

2800.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

Description of Violation

On 2/26/24:

- resident [redacted] prescription [redacted], [redacted], with label stating to discard after [redacted], were still in the residence's Medication Cart.

Plan of Correction

Accept [redacted] - 03/11/2024)

Administrator inserviced direct care staff on [redacted] regarding medication storage in accordance with the manufacturer's instructions. Administrator or designee to perform an initial medication cart audit to be completed by 3/22/24. Beginning 3/25/24, nurses and/or med techs to perform weekly medication cart audits x 12, then monthly thereafter, to ensure expired medications are promptly removed from the medication cart. The results of the audits will be presented to the quarterly QAPI committee. The POC will be reviewed at the next QAPI meeting and ongoing monitoring for compliance will be reported to the QAPI committee.

Licensee's Proposed Overall Completion Date: 03/25/2024

Implemented [redacted] - 04/11/2024)

185a Storage procedures

3. Requirements

2800.

185.a. The residence shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

185a Storage procedures (continued)

Description of Violation

Resident [redacted] is prescribed [redacted] as needed. On [redacted], this medication was not available in the residence.

On 2/26/24:

- resident [redacted] was not calibrated; on [redacted] at [redacted] the [redacted] read [redacted].
- resident [redacted] was not calibrated; on [redacted] at [redacted] the [redacted] read [redacted].

Plan of Correction

Accept [redacted] - 03/11/2024)

Administrator inserviced direct care staff on [redacted] regarding appropriate storage and access of medications. Administrator or designee to perform an initial medication cart audit to be completed by 3/22/24. Beginning 3/25/24, nurses and/or med techs to perform weekly medication cart audits x 12, then monthly thereafter, to ensure as needed medications are available in the residence. The results of the audits will be presented to the quarterly QAPI committee. The POC will be reviewed at the next QAPI meeting and ongoing monitoring for compliance will be reported to the QAPI committee.

Administrator inserviced direct care staff on 2/28/24 regarding proper storage of medical equipment in accordance with the manufacturer's instructions. Staff were trained in the calibration and use of [redacted]. Administrator calibrated glucometers 3/11/2024. Beginning, 3/15/24 nurses to ensure accurate calibration of glucometers during weekly quality control testing x 12. Administrator or designee to perform weekly audits of [redacted] to ensure accurate calibration. The results of the audits will be presented to the quarterly QAPI committee. The POC will be reviewed at the next QAPI meeting and ongoing monitoring for compliance will be reported to the QAPI committee.

Licensee's Proposed Overall Completion Date: 03/25/2024

Implemented [redacted] - 04/11/2024)