

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

April 18, 2024

[REDACTED]
DRI HEARTIS YARDLEY LLC
[REDACTED]
[REDACTED]

RE: HEARTIS YARDLEY
255 OXFORD VALLEY ROAD
YARDLEY, PA, 19067
LICENSE/COC#: 14772

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/04/2024 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: HEARTIS YARDLEY License #: 14772 License Expiration: 09/14/2024
 Address: 255 OXFORD VALLEY ROAD, YARDLEY, PA 19067
 County: BUCKS Region: SOUTHEAST

Administrator

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

Legal Entity

Name: DRI HEARTIS YARDLEY LLC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: Total Daily Staff: 137 Waking Staff: 103

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Incident Exit Conference Date: 03/04/2024

Inspection Dates and Department Representative

03/04/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 115 Residents Served: 106

Special Care Unit
 In Home: Yes Area: Generations Capacity: 21 Residents Served: 21

Hospice
 Current Residents: xx

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 106
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 31 Have Physical Disability: 0

Inspections / Reviews

03/04/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 03/23/2024

03/28/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: 04/12/2024
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 04/02/2024

Inspections / Reviews (*continued*)

03/29/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/12/2024

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 04/02/2024

04/18/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/12/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

132c Fire drill records

1. Requirements

2800.

132.c. A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the residence at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

Description of Violation

The fire drill record for the drill conducted on [REDACTED] indicates that there were 94 residents present at the time of the drill and 94 residents evacuated. However, resident [REDACTED] did not evacuate and instead was found in the resident's living room unconscious.

Plan of Correction

Accepted [REDACTED] - 03/29/2024)

Resident [REDACTED] recently discharged to a Behavioral Health Unit for evaluation and treatment as of [REDACTED] and will not be returning to the residence.

The Executive Director (ED) has changed its fire safety procedures for the community to include that upon activation of the fire alarm all residents must evacuate immediately or as quickly as possible, to a fire safe area and remain congregated for the duration of the drill. The available staff will assist all residents, including those with mobility needs, to evacuate to the fire safe area as quickly as possible.

Once inside the fire safe area the staff will account for all residents by calling out their names and identified room numbers. A written fire drill record will be documented to include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the residence at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative. The fire alarm will sound until instructed by the fire safety expert and all clear is given and announced.

Upon this notification, the staff will then escort all residents back to their designated areas and to return to normal activities.

To notify the residents of this change to the fire emergency procedures, a written notice will be provided to all current residents via email and distributed to their mailboxes by the ED or Building Services Director (BSD), or designee.

Going forward all new residents shall have a copy of the current fire safety procedure within their new resident welcome package and discuss during the residency agreement signing with the Executive Director or designee.

Staff are to be retrained on this policy by 4/26/24 and during the new hire orientation by the ED or BSD.

The BSD was re-educated on 2800.132c on 3/7/24.

Proposed Overall Completion Date: 04/26/2024

Licensee's Proposed Overall Completion Date: 04/26/2024

Implemented [REDACTED] - 04/18/2024)

132h Designated meeting place

2. Requirements

2800.

132.h. Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

Description of Violation

According to staff and resident interviews, residents come to their doorway and wait for staff instructions for further actions when the fire alarm goes off. Depending on the location of the simulated fire, the residents either go to the common area behind the firesafe door or stay at their door way for roll call. When asked what 'evacuated' means, staff A answered that the number of residents evacuated means the number of residents who were accounted for during or at the end of the fire drill.

Plan of Correction

Accept [redacted] - 03/29/2024)

Resident [redacted] recently discharged to a Behavioral Health Unit for evaluation and treatment as of [redacted] and will not be returning to the residence.

The Executive Director (ED) has changed its fire safety procedures for the community to include that upon activation of the fire alarm all residents must evacuate immediately or as quickly as possible, to a fire safe area and remain congregated for the duration of the drill. The available staff will assist all residents, including those with mobility needs, to evacuate to the fire safe area as quickly as possible.

Once inside the fire safe area the staff will account for all residents by calling out their names and identified room numbers. A written fire drill record will be documented to include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the residence at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative. The fire alarm will sound until instructed by the fire safety expert and all clear is given and announced.

Upon this notification, the staff will then escort all residents back to their designated areas and to return to normal activities.

To notify the residents of this change to the fire emergency procedures, a written notice will be provided to all current residents via email and distributed to their mailboxes by the ED or Building Services Director (BSD), or designee.

Going forward all new residents shall have a copy of the current fire safety procedure within their new resident welcome package and discuss during the residency agreement signing with the Executive Director or designee.

All staff are to be retrained on this policy by 4/26/24 and during the new hire orientation by the ED or BSD.

The BSD was re-educated on 2800.132h on 3/7/24.

Proposed Overall Completion Date: 04/26/2024

Licensee's Proposed Overall Completion Date: 04/26/2024

Implemented [redacted] - 04/18/2024)

181f Self-administer Record of medication

3. Requirements

181f Self-administer Record of medication (continued)

2800.

181.f. The resident’s record shall include a current list of prescription, CAM and OTC medications for each resident who is self-administering his medication.

Description of Violation

Resident [redacted] self-administers [redacted] medication. On [redacted] resident [redacted] record did not include CAM and OTC medications which were found in the resident's living unit, including Nature’s Bounty [redacted], [redacted] urinary pain relief, maximum strength [redacted], [redacted] oral solution, [redacted], Nature’s Bounty [redacted], and etc.

Plan of Correction

Accept [redacted] 03/28/2024)

Resident [redacted] recently discharged to a Behavioral Health Unit for evaluation and treatment as of [redacted] and will not be returning to the residence.

The Resident Care Director and Wellness Nurse will be educated by 3/29/24 on 2800.181f.

The Resident Care Director, Wellness Nurse, or designee will audit all residents by 4/22/24 who self-medicate and obtain a current list of prescribed, CAM, and OTC medications from the resident and their primary care physician to record and profile the medication in Eldermark system.

The RCD, Wellness Nurse, or designee will upon the self-med quarterly review evaluation period inspect the resident's apartment for compliance as part of an on-going policy and procedure. In addition to this policy a notice to all residents that self-administer their own medications will acknowledge and notify the clinical administration team of any updates and or changes to their medications to ensure their prescribed medications, CAM, or OTC are on file and profiled appropriately as part of ongoing compliance method.

Proposed Overall Completion Date: 04/22/2024

Licensee's Proposed Overall Completion Date: 04/22/2024

Implemented [redacted] - 04/18/2024)