

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

July 19, 2024

[REDACTED]
ARCADIA AT LIMERICK POINTE LLC

[REDACTED]
Suite 114
[REDACTED]

RE: ARCADIA AT LIMERICK POINTE
51 WEST ARCADIA DRIVE
LIMERICK, PA, 19468
LICENSE/COC#: 14795

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/06/2024 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: *ARCADIA AT LIMERICK POINTE* License #: *14795* License Expiration: *05/18/2025*
 Address: *51 WEST ARCADIA DRIVE, LIMERICK, PA 19468*
 County: *MONTGOMERY* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *ARCADIA AT LIMERICK POINTE LLC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-1* Date: *05/21/2024* Issued By: *Limerick Township*
 Type: *I-1* Date: *04/12/2021* Issued By: *Limerick Township*

Staffing Hours

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

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *New* Exit Conference Date: *06/06/2024*

Inspection Dates and Department Representative

06/06/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *110* Residents Served: *83*

Secured Dementia Care Unit

In Home: *Yes* Area: *The Connections* Capacity: *48* Residents Served: *37*

Hospice

Current Residents: *x*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *83*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *37* Have Physical Disability: *0*

Inspections / Reviews

06/06/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/20/2024*

06/17/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: *07/09/2024*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/22/2024*

Inspections / Reviews *(continued)*

06/18/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 07/09/2024

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 07/06/2024

07/19/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 07/09/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

121a - Unobstructed Egress

1. 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

The door that separates the home from the independent living side is equipped with a key pad lock. Residents need to pass the door to get to the exit stairs located on the other side of the independent living portion. On [REDACTED] at 10:30 AM, there was no code posted near the keypad lock.

Plan of Correction

Directed [REDACTED] - 06/18/2024)

The door that separates the personal care side of the home from the independent living side is equipped with a keypad lock. Residents need to pass the door to get to the exit stairs located on the other side of the independent living portion. On 06/06/2024 at 10:30 AM, there was no code posted near the keypad lock.

To meet compliance.

On Thursday, June 6, 2024, at 11:00 AM, Arcadia at Limerick Pointe Director of Maintenance fastened the access code to the entrance way on the threshold of the doors separating Personal Care and the Independent Living. The location of the doorway is on the second floor of Personal Care in the hallway between apartment numbers [REDACTED] and [REDACTED]. (Please see the photo of the threshold with the access code)

To assure that compliance is continually being met.

The Director of Maintenance completed an audit on the door located at the threshold between Personal Care and Independent Living on 6/7/24.

Starting on 6/7/24 either the Maintenance Director, Maintenance Supervisor or Executive Director are responsible for completing the audit on the second-floor doorway between the Personal Care and the Independently Living weekly. The audit will measure two items. First, is that the keypad access code is visible. Second, the code to open the door is working properly. The audit will be completed weekly and documented on the audit tool. (Please see the attached audit tool)

The Second Floor PC-IL Threshold Keypad Audit tool will be conducted weekly for 15 consecutive weeks from 6/2/24 until week ending 9/14/24. Please see the attached documents with this week's audit completed and all 15 weeks are listed to be audited.

Proposed Overall Completion Date: 09/14/2024

Directed Plan of Correction:

Only the overall completion date has been directed: Please continue your plan as stated with the 15 weeks of audits, but submit proof of compliance/implementation by 7/6/24

Directed Completion Date: 07/06/2024

Implemented [REDACTED] - 07/19/2024)