

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

August 1, 2024

[REDACTED], VICE PRESIDENT OF OPERATIONS  
ACTS RETIREMENT-LIFE COMMUNITIES INC  
[REDACTED]  
[REDACTED]

RE: OAKBRIDGE TERRACE AT FORT  
WASHINGTON ESTATES  
735 SUSQUEHANNA ROAD  
FORT WASHINGTON, PA, 19034  
LICENSE/COC#: 13894

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/14/2024 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 FORT WASHINGTON ESTATES License #: 13894 License Expiration: 05/24/2025  
Address: 735 SUSQUEHANNA ROAD, FORT WASHINGTON, PA 19034  
County: MONTGOMERY 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: 09/17/1998 Issued By: COPA L & I

**Staffing Hours**

Resident Support Staff: 0 Total Daily Staff: 12 Waking Staff: 9

**Inspection Information**

Type: Full Notice: Unannounced BHA Docket #:  
Reason: Renewal Exit Conference Date: 06/14/2024

**Inspection Dates and Department Representative**

06/14/2024 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information			
License Capacity: 18		Residents Served: 12	
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: 12	
Diagnosed with Mental Illness: 0		Diagnosed with Intellectual Disability: 0	
Have Mobility Need: 0		Have Physical Disability: 0	

**Inspections / Reviews**

06/14/2024 - Full  
Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 07/12/2024

07/23/2024 - POC Submission  
Submitted By: [REDACTED] Date Submitted: 07/24/2024  
Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 07/30/2024

Inspections / Reviews (*continued*)

08/01/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 07/24/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

17 Record confidentiality

1. Requirements

2800.

17. Confidentiality of Records - Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

Description of Violation

On 6/14/24, at 1:05P.M., in the living room the residences pharmacy binder was unlocked, unattended, and accessible.

Repeat Violation: 6/26/23 et al

Plan of Correction

Accept (████) - 07/23/2024)

2800. 17 Record Confidentiality

Pharmacy binder was immediately removed from the living room area and secured in the medication cart by the DAL.

Director of Assisted Living (DAL) or designee will reeducate OBT nurses and medication technicians on Confidentiality of Records Regulation 2800.17 by 7/2/24.

DAL or designee will conduct random weekly audits on Confidentiality of Records for 6 months.

DAL or designee will report audit findings to QAPI committee for 6 months and based on outcome of the audits the QAPI committee will determine the frequency of ongoing audits.

Proposed Overall Completion Date: 07/09/2024

Licensee's Proposed Overall Completion Date: 07/09/2024

Implemented (████) - 08/01/2024)

141b1 Annual medical evaluation

2. Requirements

2800.

141.b. A resident shall have a medical evaluation:

- 1. At least annually.

Description of Violation

Resident # 1's most recent medical evaluation was completed on ██████████. The resident's previous medical evaluation was completed on 10/20/21.

Plan of Correction

Accept (████) - 07/23/2024)

2800.141b Annual Medical Evaluation

Director of Assisted Living (DAL) immediately reviewed remaining resident records, and annual medical evaluations was present for all other residents.

DAL or designee will reeducate nurses on the Annual Medical Evaluation regulation 2800.141b requirement by 7/2/24.

DAL or designee will conduct random monthly audits to review for Annual Medical Evaluations for 6 months.

141b1 Annual medical evaluation (continued)

DAL or designee will report audit findings to QAPI committee for 6 months and based on outcome of the audits the QAPI committee will determine the frequency of ongoing audits.

Licensee's Proposed Overall Completion Date: 07/09/2024

Implemented ( ) - 08/01/2024)

183e Storing Medications

3. 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 6/14/24 there was a large pink oval shaped pill in the bottom of the medication cart.

Repeat Violation: 6/26/23 et al

Plan of Correction

Accept ( ) - 07/23/2024)

2800. 183e Storing Medications

The large pink oval shaped pill was immediately removed from the medication cart and disposed of in proper receptacle, by the DAL.

The Director of Assisted Living (DAL) or designee will reeducate medication technicians and nurses on Proper Medication Storage regulation 2800.183 by 7/2/24.

The DAL or designee will conduct random monthly medication cart audits for 6 months to monitor for proper medication storage.

DAL or designee will report audit findings to QAPI committee for 6 months and based on outcome of the audits the QAPI committee will determine the frequency of ongoing audits.

Proposed Overall Completion Date: 07/09/2024

Licensee's Proposed Overall Completion Date: 07/09/2024

Implemented ( ) - 08/01/2024)

187a Medication record

4. Requirements

2800.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

9. Administration times.

13. Date and time of medication administration.

14. Name and initials of the staff person administering the medication.

187a Medication record (*continued*)**Description of Violation**

*Resident # 2 is prescribed NovoLin FlexPen 10 units subcutaneously every morning and evening:*

- The medication administration record (MAR) does not indicate the administration times for the morning administration on 6/13/24 and 6/14/24 and does not indicate the administration time for the evening administration on 6/13/24.*
- This medication was not administered on 6/8/24 due to a [REDACTED] however, the medication administration record does not indicate the reason that this medication was not administered.*

**Plan of Correction**

**Accept ( [REDACTED] - 07/23/2024)**

*2800.187a Medication Record*

*Director of Assisted Living (DAL) confirmed that on 6/8/24 the medication administration record did not indicate the reason the medication was not administered. DAL confirmed that the Novolin FlexPen administration times on 6/13/24 and 6/14/24 were present on the medication administration record.*

*DAL will reeducate medication technicians and nurses on Proper medication administration and documentation regulation 2800.187 by 7/2/24.*

*DAL or designee will conduct random monthly audits of EMAR documentation for 6 months.*

*DAL or designee will report audit findings to QAPI committee for 6 months and based on outcome of the audits the QAPI committee will determine the frequency of ongoing audits.*

*Disclaimer: Preparation and/or execution of this plan of correction does not constitute admission or agreement by the providers of the truth of the facts alleged or conclusions set forth in the statement of deficiencies. The plan of correction is prepared solely as a matter of compliance with federal and state law.*

**Licensee's Proposed Overall Completion Date: 07/09/2024**

**Implemented ( [REDACTED] - 08/01/2024)**