

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

October 29, 2024

[REDACTED]
701 LANSDALE OPERATING LLC
[REDACTED]

RE: ST. MARY VILLA FOR INDEPENDENT
& RETIREMENT LIVING
701 LANSDALE AVENUE
LANSDALE, PA, 19446
LICENSE/COC#: 14107

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/24/2024 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: *ST MARY VILLA FOR INDEPENDENT & RETIREMENT LIVING* License #: *14107* License Expiration: *11/03/2024*

Address: *701 LANSDALE AVENUE, LANSDALE, PA 19446*

County: *MONTGOMERY* Region: *SOUTHEAST*

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: *701 LANSDALE OPERATING LLC*

Address: [Redacted]

Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Type: *C 2 LP* Date: *05/26/1992* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *68* Waking Staff: *51*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:

Reason: *Monitoring* Exit Conference Date: *09/24/2024*

Inspection Dates and Department Representative

09/24/2024 On Site [Redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *90* Residents Served: *54*

Secured Dementia Care Unit

In Home: *Yes* Area: *St. Camillus* Capacity: *20* Residents Served: *14*

Hospice

Current Residents: *4*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *54*

Diagnosed with Mental Illness: *6* Diagnosed with Intellectual Disability: *0*

Have Mobility Need: *14* Have Physical Disability: *0*

Inspections / Reviews

09/24/2024 - Partial

Lead Inspector: [Redacted] Follow-Up Type: *POC Submission* Follow-Up Date: *10/18/2024*

10/22/2024 - POC Submission

Submitted By: [Redacted] Date Submitted: *10/29/2024*

Reviewer: [Redacted] Follow-Up Type: *POC Submission* Follow-Up Date: *10/25/2024*

Inspections / Reviews (*continued*)

10/29/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/29/2024

Reviewer: [REDACTED]

Follow-Up Type: *Bypass Document
Submission*

10/29/2024 - Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/29/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

82c - Locking Poisonous Materials

1. Requirements

2600.

82.c. Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

Description of Violation

On [redacted], four tubes of [redacted] with a warning label reading "Keep out of reach of children. In case of accidental ingestion, contact poison control center immediately" were found in the bedside table of resident room# [redacted]. Not all the residents of the home including the occupant of room [redacted] have been assessed as capable of recognizing and using poisons safely.

Plan of Correction

Accept ([redacted] - 10/29/2024)

- 1. No harm was found with resident in room [redacted] due to periguard ointment. Periguard was immediately removed from room.
- 2. On 9/24/24 all rooms were checked for personal hygiene items, any safety hazardous materials have been removed.
- 3. All staff have been educated on poisonous materials by RCC.
- 4. Follow up audits to be done daily by RCC for 1 month
- 5. Findings will be reviewed at QAPI

Licensee's Proposed Overall Completion Date: 10/29/2024

Implemented ([redacted] - 10/29/2024)

144c1 - Smoking Area Guidelines

2. Requirements

2600.

144.c. A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures that include the following:

- 1. Proper safeguards inside and outside of the home to prevent fire hazards involved in smoking, including providing fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the home, extinguishing procedures, fire resistant furniture both inside and outside the home and fire extinguishers in the smoking rooms.

Description of Violation

On [redacted] around 12pm, 18 cigarette butts were found on top of a trash can outside of the St. Camillus SDCU patio. This is not a designated smoking area for the home.

Plan of Correction

Accept ([redacted] - 10/29/2024)

- 1. All cigarette butts were immediately removed from courtyard area.
- 2. RCC audited courtyard ensuring free from cigarette butts on 9/24/24.
- 3. All staff have been educated on St. Mary Center smoking policy by their dept heads.
- 4. Housekeeping Dir. will audit courtyard daily for 1 month.
- 5. Findings will be reviewed at QAPI

Licensee's Proposed Overall Completion Date: 10/29/2024

Implemented ([redacted] - 10/29/2024)

144c1 - Smoking Area Guidelines (*continued*)

183e - Storing Medications

3. Requirements

2600.

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 [REDACTED], The following medication cards were observed to have a punctured blister foil with the medication still present in the spot- exposing it to contamination or improper sanitation. Resident [REDACTED] tablet blister pack- blister #11; Resident [REDACTED] tablet blister pack- Blister #22 Resident [REDACTED] blister pack- blisters #19, 25, 26.

Plan of Correction

Accept [REDACTED] - 10/29/2024)

1. No harm was caused to residents [REDACTED] and [REDACTED]. And their contaminated medications were immediately discarded.
2. All carts were audited by RCC on 9/24/24 and all other blister packs were found intact.
3. RCC educated all med techs.
4. RCC to audit weekly x4.
5. Findings to be reviewed at QAPI

Licensee's Proposed Overall Completion Date: 10/29/2024

Implemented [REDACTED] - 10/29/2024)