

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

November 19, 2024

[REDACTED]
ABINGTON SENIOR CARE LLC
[REDACTED]

ATTN - BILL SNOW
[REDACTED]

RE: THE TERRACE AT CHESTNUT HILL
495 EAST ABINGTON AVENUE
PHILADELPHIA, PA, 19118
LICENSE/COC#: 14157

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/27/2024 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: THE TERRACE AT CHESTNUT HILL **License #:** 14157 **License Expiration:** 08/16/2025
Address: 495 EAST ABINGTON AVENUE, PHILADELPHIA, PA 19118
County: PHILADELPHIA **Region:** SOUTHEAST

Administrator

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

Legal Entity

Name: ABINGTON SENIOR CARE LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I 1 **Date:** 09/17/1996 **Issued By:** City of Philadelphia

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 117 **Waking Staff:** 88

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint, Incident **Exit Conference Date:** 09/27/2024

Inspection Dates and Department Representative

09/27/2024 On Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 122 **Residents Served:** 83

Secured Dementia Care Unit

In Home: Yes **Area:** Memory Care **Capacity:** 45 **Residents Served:** 25

Hospice

Current Residents: 7

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: 34 **Have Physical Disability:** 0

Inspections / Reviews

09/27/2024 - Partial

Lead Inspector: [REDACTED] **Follow Up Type:** POC Submission **Follow Up Date:** 11/14/2024

Inspections / Reviews *(continued)*

11/19/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/13/2024

Reviewer: [REDACTED]

Follow Up Type: *Bypass Document
Submission*

11/19/2024 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/19/2024

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [REDACTED] as the door to the elevator opened on the first-floor, resident [REDACTED] witnessed resident [REDACTED] and resident [REDACTED] fist fighting and pushing each other forcefully, on the elevator. The elevator stopped and Resident [REDACTED] began screaming, "help" as Resident [REDACTED] fell out of the open elevator door and onto the floor after being pushed by Resident [REDACTED]. Resident [REDACTED] then stepped out of the elevator. Staff person A responded to the call for help and observed that resident [REDACTED] was standing by the elevator with [REDACTED] hands in an upright position and [REDACTED] visibly shaking. Staff person A removed resident [REDACTED] from the scene. Staff person B was the second to respond to the incident, who notified emergency services and the nursing director of the incident. Resident [REDACTED] was transported to the hospital and diagnosed with a hip fracture.

Plan of Correction

Accepted [REDACTED] - 11/19/2024)

On [REDACTED], as the door to the elevator opened on the first-floor, resident [REDACTED] witnessed resident [REDACTED] and resident [REDACTED] fist fighting and pushing each other forcefully, on the elevator. The elevator stopped and Resident [REDACTED] began screaming, "help" as Resident [REDACTED] fell out of the open elevator door and onto the floor after being pushed by Resident [REDACTED]. Resident [REDACTED] then stepped out of the elevator. Staff person A responded to the call for help and observed that resident [REDACTED] was standing by the elevator with [REDACTED] hands in an upright position and [REDACTED] visibly shaking. Staff person A removed resident [REDACTED] from the scene. Staff person B was the second to respond to the incident, who notified emergency services and the nursing director of the incident. Resident [REDACTED] was transported to the hospital and diagnosed with a hip fracture.

- Resident [REDACTED] was immediately escorted from the situation and remained with care staff until incident was resolved.
- Director of Wellness will complete education to care staff on abuse, neglect and resident rights by 11/14/2024.
- Director of Wellness will provide education to care staff on proper techniques for handling behaviors of residents with Dementia by 11/14/2024.
- Director of Wellness will continue to conduct education on abuse and behaviors during monthly staff meetings for the next 6 months and ongoing as needed.
- Executive Director and Director of Wellness will complete education on residents rights with the residents by 11/14/2024.

Proposed Overall Completion Date: 11/14/2024

Licensee's Proposed Overall Completion Date: 11/14/2024

Implemented [REDACTED] - 11/19/2024)

227d - Support Plan Medical/Dental

2. Requirements

2600.

227d Support Plan Medical/Dental (continued)

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

The medical evaluation for resident [redacted], dated [redacted], indicates the resident has medical diagnoses to include: [redacted], [redacted], [redacted], [redacted] and the [redacted]. The resident's support plan dated 2 13 24 does not document how this need will be met.

Repeated Violation: 10 16 23 et a..

Plan of Correction

Accept [redacted] - 11/19/2024)

The medical evaluation for resident [redacted] dated 12 29 23, indicates the resident has medical diagnoses to include: [redacted] and the [redacted]. The resident's support plan dated 2 13 24 does not document how this need will be met.

- Director of Wellness reviewed the medical evaluation for resident [redacted] dated 12 29 2023 for accuracy of diagnoses listed in comparison to physician orders.
- Director of Wellness immediately corrected support plan of resident [redacted] dated 2 13 24 to include all diagnoses listed on physician orders.
- Executive Director and Director of Wellness will review upon admission and monthly each completed support plan for compliance and to ensure all needs and how we will meet the residents' needs are completed and documented.
- Director of Wellness will complete education to the nursing staff on proper documentation of support plans to ensure and maintain compliance by 11/14/2024.

Proposed Overall Completion Date: 11/14/2024

Licensee's Proposed Overall Completion Date: 11/14/2024

Implemented [redacted] - 11/19/2024)