

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

January 28, 2025

[REDACTED]
PARK CREEK MC, LLC
[REDACTED]

RE: PARK CREEK PLACE MEMORY CARE
1089 HORSHAM ROAD
NORTH WALES, PA, 19454
LICENSE/COC#: 15085

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/20/2024 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: *PARK CREEK PLACE MEMORY CARE* License #: *15085* License Expiration: *06/14/2025*
 Address: *1089 HORSHAM ROAD, NORTH WALES, PA 19454*
 County: *MONTGOMERY* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *PARK CREEK MC, LLC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: [REDACTED] Total Daily Staff: *54* Waking Staff: *41*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #: [REDACTED]
 Reason: *Complaint, Incident* Exit Conference Date: *11/20/2024*

Inspection Dates and Department Representative

11/20/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *48* Residents Served: *27*

Secured Dementia Care Unit
 In Home: *Yes* Area: *entire home* Capacity: *48* Residents Served: *27*

Hospice
 Current Residents: *5*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *27*
 Diagnosed with Mental Illness: *27* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *27* Have Physical Disability: *0*

Inspections / Reviews

11/20/2024 Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *12/13/2024*

12/31/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: *01/15/2025*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *01/05/2025*

Inspections / Reviews *(continued)*

01/09/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/15/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 01/20/2025

01/28/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/15/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

3c - Post Current License

1. Requirements

2600.

3.c. The personal care home shall post the current license, a copy of the current license inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

Description of Violation

On [REDACTED] the home's current license, dated [REDACTED], was not posted in a conspicuous and public place in the home. The one posted was an old license dated [REDACTED] before the change of ownership.

Plan of Correction

Accept [REDACTED] - 01/09/2025)

Current License dated 6/14/2024 was posted in the community on 11/20/2024. The ED or designee will verify weekly for the next 2 weeks then monthly for the next 3 months that the current license is posted. Started 11/22/2024.

Current Directors will be in serviced by the Executive Director on Regulation 2600. 3c regarding posting of the current license and location of the license within the community . Completion by 1/1/2025

Regulation 2600. 3c regarding posting of the License will be discussed by the Executive Director with current Directors in attendance at the next Quarterly Quality review meeting 1/9/2025

Licensee's Proposed Overall Completion Date: 01/20/2025

Implemented [REDACTED] - 01/28/2025)

51 - Criminal Background Check

3. Requirements

2600.

51. Criminal History Checks - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Description of Violation

Staff A, the home's administrator, resides in a different state. The home ran a background check on [REDACTED] but did not utilize a Pennsylvania State Police Criminal Background Check and the Federal Bureau of Investigation (FBI) check.

Plan of Correction

Accept [REDACTED] - 01/09/2025)

The PACH was ran on 11/20/2024 for the Administrator.

Business Office Manager received training by the Executive Director on Regulation 2600.51. Completed 12/4/2024.

The ED or Designee will audit current employee files by 12/31/2024 and an audit will be completely month for the next 3 months to ensure all new staff is compliant with 2600 51.

Regulation 2600.51 regarding criminal history & background checks will be discussed by the Executive Director with current Directors in attendance at the next Quarterly Quality review meeting 1/9/2025

Licensee's Proposed Overall Completion Date: 01/20/2025

Implemented [REDACTED] 01/28/2025)

65d - Initial Direct Care Training

4. Requirements

2600.

65.d. Direct care staff persons hired after April 24, 2006, may not provide unsupervised ADL services until completion of the following:

- 2. Successful completion and passing the Department-approved direct care training course and passing of the competency test.

65d - Initial Direct Care Training (continued)

Description of Violation

Direct care staff person B, hired on [REDACTED], began providing unsupervised ADL services on [REDACTED]. However, the staff person did not complete the Department-approved direct care training course and pass the competency test.

Plan of Correction

Accept [REDACTED] - 01/09/2025)

The employee in question provided the community proof of education on 12/4/2024.

The ED or Designee will complete an audit for current direct care staff by 12/31/2024 for compliance of 2600.65d. (Training will be provided for staff if identified to not be in compliance of 2600.65d & by 12/31/2024)

ED or designee will complete an audit monthly for the next 3 months on all new hires for compliance of 2600.65d starting 12/31/2024.

Regulation 2600.65d regarding direct care training expectations will be discussed by the Executive Director with current Directors in attendance at the next Quarterly Quality review meeting 1/9/2025

Licensee's Proposed Overall Completion Date: 01/20/2025

Implemented [REDACTED] - 01/28/2025)