

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

February 14, 2025

[REDACTED]
CSW ARBOUR SQUARE V HUNTINGDON VALLEY, L.P.

[REDACTED]
Suite 215
[REDACTED]

RE: CRESCENT FIELDS AT
HUNTINGDON VALLEY
2507 PHILMONT AVE
HUNTINGDON VALLEY, PA, 19006
LICENSE/COC#: 15005

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/09/2024 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: CRESCENT FIELDS AT HUNTINGDON VALLEY License #: 15005 License Expiration: 06/28/2025
Address: 2507 PHILMONT AVE, HUNTINGDON VALLEY, PA 19006
County: MONTGOMERY Region: SOUTHEAST

Administrator

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

Legal Entity

Name: CSW ARBOUR SQUARE V HUNTINGDON VALLEY, L.P.
Address: [Redacted]
Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Type: I-1 Date: 06/07/2023 Issued By: Lower Moreland Township

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 80 Waking Staff: 60

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Monitoring Exit Conference Date: 12/09/2024

Inspection Dates and Department Representative

12/09/2024 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information
License Capacity: 149 Residents Served: 62
Secured Dementia Care Unit
In Home: Yes Area: Memory Care Capacity: 19 Residents Served: 16
Hospice
Current Residents: 3
Number of Residents Who:
Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 62
Diagnosed with Mental Illness: 10 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 18 Have Physical Disability: 3

Inspections / Reviews

12/09/2024 Partial
Lead Inspector: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 02/03/2025
02/07/2025 - POC Submission
Submitted By: [Redacted] Date Submitted: 02/10/2025
Reviewer: [Redacted] Follow-Up Type: Document Submission Follow-Up Date: 02/14/2025

Inspections / Reviews *(continued)*

02/14/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/10/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

183e - Storing Medications

1. 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] tab blister pack
- Resident [REDACTED] blister pack

Repeat Violation Date: 9/30/24 et al

Plan of Correction

Accept ([REDACTED] - 02/07/2025)

The findings were corrected onsite at time of inspection on 12/9/24. Blister packs containing pills that were found to contain holes were removed and wasted according to the handling policy by the Healthcare Director.

The Resident Care Coordinator performed a complete Memory Care medication cart audit on 12/13/24. No additional deficiencies were identified.

By 12/30/24, the Healthcare Director shall re-educated current Med Techs on medication administration practices, expressly, but not limited to, properly disposing of medications removed from packaging, fallen out of the packaging, or refused by the resident.

Beginning 12/13/24, the Healthcare Director/designee performed weekly med cart audits for 30 days to ensure that medications pulled from their container but not administered are appropriately disposed of to avoid potential medication errors.

Beginning 1/29/24 the Healthcare Director/Resident Care Coordinator and Administrator will monitor for ongoing compliance. Compliance monitoring will be conducted x 2 quarters as part of Quality Assurance meetings and the Administrator will retain the meeting minutes on file.

Licensee's Proposed Overall Completion Date: 02/02/2025

Implemented ([REDACTED] 02/14/2025)