

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

April 4, 2025

[REDACTED]
LCS DOYLESTOWN LLC

[REDACTED]
Suite 820
[REDACTED]

RE: THE SOLANA DOYLESTOWN
1621 EASTON ROAD
WARRINGTON, PA, 18976
LICENSE/COC#: 14531

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/07/2025 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 SOLANA DOYLESTOWN License #: 14531 License Expiration: 09/11/2025
Address: 1621 EASTON ROAD, WARRINGTON, PA 18976
County: BUCKS Region: SOUTHEAST

Administrator

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

Legal Entity

Name: LCS DOYLESTOWN LLC
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: Total Daily Staff: 148 Waking Staff: 111

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint, Incident Exit Conference Date: 01/07/2025

Inspection Dates and Department Representative

01/07/2025 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 129 Residents Served: 82

Secured Dementia Care Unit

In Home: Yes Area: Memory Care Capacity: 34 Residents Served: 29

Hospice

Current Residents: xx

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 81
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 66 Have Physical Disability: 1

Inspections / Reviews

01/07/2025 Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/07/2025

02/28/2025 - POC Submission

Submitted By: [REDACTED] Date Submitted: 04/01/2025
Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 03/05/2025

Inspections / Reviews *(continued)*

03/19/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/01/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 03/29/2025

04/04/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/01/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

16c - Written Incident Report

1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department’s personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On [redacted], resident [redacted] was sent out and admitted to a hospital due to a [redacted] accident, and passed away on [redacted]. The home did not report this incident to the department.

Plan of Correction

Directed [redacted] - 03/19/2025)

All department heads were given an in service by [redacted], Executive Director, on [redacted] on how to complete a reportable and what needs to be reported. Previously [redacted], DOHS and [redacted], ED, would complete. The plan to prevent the violation from occurring again is that a department head who is now trained, is able to complete the reportable and send in the absence of [redacted] or [redacted] any day of the week. This is ongoing effective immediately with no end date.

Proposed Overall Completion Date: 03/05/2025

Directed Plan of Correction:

Beginning within 5 days of the receipt of the acceptable plan of correction, the administrator shall review all internal incidents weekly for 2 months to ensure reportable incidents are submitted to the department. Remediation shall be provided to pertinent staff by the administrator within 5 days of finding unreported incidents/conditions.

Directed Completion Date: 03/28/2025

Implemented [redacted] - 04/04/2025)

25b - Contract Signatures

2. Requirements

2600.

25.b. The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident’s designated person if any, if the resident agrees.

Description of Violation

The resident-home contract, dated [redacted], for resident [redacted] was not signed by the resident's designated person. The contract indicates that the resident refused to sign, but does not indicate that the resident was given the opportunity to sign.

Plan of Correction

Accept [redacted] - 03/19/2025)

[redacted], audited all charts on [redacted] and updated the double check system in place. All refusals will be followed back up with multiple attempts and dated that they were given opportunity to sign. Completed by 2/12/25 by [redacted], ED and [redacted], Business Office Manager. Effective immediately the last Wednesday of every month the BOM and ED will revisit the refusals to make 3 attempts. We have an excel spreadsheet with all the data that we will continue to update and document.

Licensee's Proposed Overall Completion Date: 03/05/2025

Implemented [redacted] - 04/04/2025)