

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

January 23, 2025

[REDACTED]
PHOEBE RICHLAND HEALTH CARE CENTER
[REDACTED]

RE: MEADOW GLEN AT PHOEBE
RICHLAND
108 SOUTH MAIN STREET
RICHLANDTOWN, PA, 18955
LICENSE/COC#: 14225

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/26/2024 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: MEADOW GLEN AT PHOEBE RICHLAND **License #:** 14225 **License Expiration:** 02/08/2025
Address: 108 SOUTH MAIN STREET, RICHLANDTOWN, PA 18955
County: BUCKS **Region:** SOUTHEAST

Administrator

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

Legal Entity

Name: PHOEBE RICHLAND HEALTH CARE CENTER
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I-2 **Date:** 11/30/2015 **Issued By:** Richland Borough

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 108 **Waking Staff:** 81

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident **Exit Conference Date:** 11/26/2024

Inspection Dates and Department Representative

11/26/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 100 **Residents Served:** 70

Secured Dementia Care Unit

In Home: Yes **Area:** SDCU **Capacity:** 40 **Residents Served:** 32

Hospice

Current Residents: 5

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 70
Diagnosed with Mental Illness: 25 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 38 **Have Physical Disability:** 3

Inspections / Reviews

11/26/2024 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 12/27/2024

12/23/2024 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 01/22/2025
Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 12/27/2024

Inspections / Reviews *(continued)*

01/02/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/22/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 01/27/2025

01/23/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/22/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

202 - Prohibitions

1. Requirements

2600.

202. The following procedures are prohibited:

1. Seclusion, defined as involuntary confinement of a resident in a room from which the resident is physically prevented from leaving, is prohibited. This does not include the admission of a resident in a secured dementia care unit in accordance with § 2600.231 (relating to admission).
2. Aversive conditioning, defined as the application of startling, painful or noxious stimuli, is prohibited.
3. Pressure point techniques, defined as the application of pain for the purpose of achieving compliance, is prohibited.
4. A chemical restraint, defined as use of drugs or chemicals for the specific and exclusive purpose of controlling acute or episodic aggressive behavior, is prohibited. A chemical restraint does not include a drug ordered by a physician or dentist to treat the symptoms of a specific mental, emotional or behavioral condition, or as pretreatment prior to a medical or dental examination or treatment.
5. Mechanical restraint, defined as a device that restricts the movement or function of a resident or portion of a resident's body, is prohibited. Mechanical restraints include geriatric chairs, handcuffs, anklets, wristlets, camisoles, helmet with fasteners, muffs and mitts with fasteners, poseys, waist straps, head straps, papoose boards, restraining sheets, chest restraints and other types of locked restraints. A mechanical restraint does not include a device used to provide support for the achievement of functional body position or proper balance that has been prescribed by a medical professional as long as the resident can easily remove the device.
6. A manual restraint, defined as a hands-on physical means that restricts, immobilizes or reduces a resident's ability to move his arms, legs, head or other body parts freely, is prohibited. A manual restraint does not include prompting, escorting or guiding a resident to assist in the ADLs or IADLs.

Description of Violation

Resident [REDACTED] is prescribed [REDACTED], take ¼ tablet by mouth three times daily as needed for agitation. The medication was administered to the resident on [REDACTED] at 10:40 AM; [REDACTED] at 12:05 PM and 8:17 PM; [REDACTED] at 3:02 AM; [REDACTED] at 2:11 PM; and [REDACTED] at 12:11 AM to control or reduce behaviors observed related to agitation and confusion. There are no documentation of attempted non-pharmacological interventions noted in response to residents behavior's at the time the medication was administered. The medication was administered to control resident's behaviors of agitation and is considered as a chemical restraint.

Plan of Correction

Accept [REDACTED] - 01/02/2025)

Resident [REDACTED] physician provided a diagnosis for the identified medication. A medication review has been conducted by a Nurse on current residents to ensure psychotropic medications have been appropriately prescribed. Licensed Nursing staff will be educated by PCHA / designee on the need for review of diagnoses associated with psychotropic medication orders to ensure they have been appropriately prescribed by 1/13/25. Nursing staff will be educated by PCHA / designee on the need to document non-pharmacological interventions in response to a resident's behavior prior to administering a PRN psychotropic medication by 1/13/25. Audits of ordered psychotropic medications will be completed by PCHA / Designee monthly x 3 months to ensure they have been appropriately prescribed starting 1/16/25. Audits of PRN medications will be completed by PCHA / Designee monthly x3 months to ensure non-pharmacological interventions have been documented prior to administering a PRN psychotropic medication starting 1/16/25. Results of audits will be reported to QAA Committee.

Licensee's Proposed Overall Completion Date: 01/23/2025

Implemented [REDACTED] - 01/23/2025)

224a - Preadmission Screen Form

2. Requirements

2600.

224a Preadmission Screen Form (continued)

224.a. A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

Description of Violation

Resident [REDACTED] was admitted to the home on [REDACTED]; however, the resident's preadmission screening form was completed on [REDACTED]

Plan of Correction

Accept [REDACTED] - 01/02/2025)

The Sales Advisor will be educated by the PCHA on the need to ensure pre admission screenings are completed within 30 days prior to admission by 1/10/25. PCHA / Designee will audit all admissions monthly x3 months to ensure pre admission screenings have been completed within 30 days prior to admission starting on 1/16/25. Results of audits will be reported to QAA Committee.

Licensee's Proposed Overall Completion Date: 01/23/2025

Implemented [REDACTED] - 01/23/2025)