

Department of Human Services
Bureau of Human Service Licensing

March 31, 2021

[REDACTED] ADMINISTRATOR

BENSALEM PCH LLC
6400 HULMEVILLE ROAD
BENSALEM, PA 19020

RE: ALLEGRIA AT THE OAKS
6400 HULMEVILLE ROAD
BENSALEM, PA, 19020
LICENSE/COC#: 14367

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/01/2021, 03/02/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Shawn Parker

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: ALLEGRIA AT THE OAKS Licens e #: 14367 Licens e Expiration Date: 05/29/2021
Address : 6400 HULMEVILLE ROAD, BENSALEM, PA 19020
County: BUCKS Region: SOUTHEAST

Administrator

Name: [REDACTED] Phone: 2157529140 Email: [REDACTED]

Legal Entity

Name: BENSALEM PCH LLC
Address: 6400 HULMEVILLE ROAD, BENSALEM, PA, 19020
Phone: 2157529140 Email: [REDACTED]

Certificate(s) of Occupancy

Type: Other Date: 10/18/2018 Issued By: Bensalem twp

Staffing Hours

Re ident Support Staff: 0 Total Daily Staff: 99 Waking Staff: 74

Inspection

Type: Full Notice: Unannounced BHA Docket #:
Reason: Renewal Exit Conference Date: 03/02/2021

Inspection Dates and Department Representative

03/01/2021 - On-Site: [REDACTED]
03/02/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 95 Residents Served: 55

Secured Dementia Care Unit

In Home: Yes Area: Grove-1st Capacity: 36 Residents Served: 28

Hospice

Current Re ident : 4

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 54

Diagnosed with Mental Illness: 7 Diagnosed with Intellectual Disability: 1

Have Mobility Need: 44 Have Physical Disability: 0

Inspections / Reviews

03/01/2021 - Full

Lead Inspector: [REDACTED] Follow Up Type: POC Submission Follow-Up Date: 03/21/2021

3/29/2021 POC Submission

Lead Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 04/05/2021

3/31/2021 - Document Submission

Lead Reviewer: [REDACTED] Follow-Up Type: Not Required

107d - Procedure Emergency Management Agency Submission

1. Requirements

2600.

107.d. The written emergency procedures shall be reviewed, updated and submitted annually to the local emergency management agency.

Description of Violation

The home's written emergency procedures have not been sent to local emergency management agency since 2019.

Plan of Correction

Accept

A master calendar has been developed in which all annual/monthly regulations will be inserted to insure timely completion.

The Emergency Management Plan will be submitted to the local authority each year in July. It is the responsibility of the Executive Director to insure that the plan is submitted in a timely manner.

Completion Date: 07/30/2021

Update - 03/29/2021

SP - 03-29-2021 - Home's emergency procedures will be submitted to local emergency management agency by Friday 04-02-2020.

Document Submission

Implemented

See Master Calendar Attachment.

Emergency Management Plan sent to Bensalem Fire Co. on Mar. 30, 2021.

141b1 - Annual Medical Evaluation

1. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident #3's most recent medical evaluation was completed on 2/4/2021. The resident's previous medical evaluation was completed on 2/1/2019. Resident #3's 2020 medical evaluation was not completed.

Plan of Correction

Accept

A new position was developed, Medical Receptionist. The incumbent in this position will have as the primary responsibility to insure that all necessary documentation in the chart is completed on a timely basis, and that all required input is there. DON will oversee the work of the Medical Receptionist.

Completion Date: 04/30/2021

Document Submission

Implemented

See Medical Receptionist job description attached.

190a Completion Medication Course

1. Requirements

2600.

190.a. A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

190a - Completion Medication Course (*continued*)**Description of Violation**

Staff person A, who has not successfully completed the Department-approved medications administration course in 9/2020, administered medications to residents on the following dates and between the hours of:

On 2/13/21 from 7:00 am-11:00 pm
On 2/14/21 from 7:00 am-11:00 pm
On 2/15/21 from 3:00 pm-11:00 pm
On 2/17/21 from 7:00 am-3:00 pm
On 2/20/21 from 7:00 am- 3:00 pm
On 2/21/21 from 7:00 am- 11:00pm
On 2/22/21 from 7:00 am- 11:00 pm
On 2/23/21 from 7:00 am- 3:00pm

Plan of Correction**Accept**

Staff person A has completed the department approved medication administration course.

Going forward the trainer will observe the med techs, and provide the necessary training in February/September. Additionally, staff from our building will take the train the trainer course, so that this training can be provided in-house. DON will be responsible to insure that each med tech is up to date on his/her training; and, DON will insure that trainers are available, either in-house or from the outside.

Completion Date: 09/30/2021

Document Submission**Implemented**

Please see attached training.

190c - Record of Training

1. Requirements

2600.

190.c. A record of the training shall be kept including the staff person trained, the date, source, name of trainer and documentation that the course was successfully completed.

Description of Violation

The home's medication administration training record for staff person A does not include documentation that the course was successfully completed. Staff person A's MAR reviews and the medication administration observations trainings were done all on the same day in 2019. Staff person A's annual practicum for 2020 was incomplete and staff A was not recertified by med-tech trainer.

Plan of Correction**Accept**

Staff person A was brought up to date on her training.

Going forward, the trainer will observe the med-techs in February and September.

Additionally, our own staff will be certified as trainers, so that this training can be provided in-house.

A record of training is kept in a binder, which is maintained by receptionist. This practice will continue. DON will review binder for completeness monthly.

Completion Date: 09/30/2021

Document Submission**Implemented**

Please see attached training.

224a - Preadmission Screen Form

1. Requirements

2600.

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 #1 was admitted to the home on [REDACTED]; however, the resident's preadmission screening form was completed on 2/4/2021

Plan of Correction

Accept

A new position was developed, Medical Receptionist. The incumbent in this position will have as the primary responsibility to insure that all necessary documentation in the chart is completed on a timely basis, and that all required input is there. DON will oversee the work of the Medical Receptionist.

Completion Date: 04/30/2021

Document Submission

Implemented

See Medical Receptionist job description attached.

227g -Support Plan Signatures

1. Requirements

2600.

227.g. Individuals who participate in the development of the support plan shall sign and date the support plan.

Description of Violation

Resident #1 and Staff member B participated in the development of the initial support plan completed on 8/28/20. However, the resident nor Staff member B signed the support plan.

Plan of Correction

Accept

A new position was developed, Medical Receptionist. The incumbent in this position will have as the primary responsibility to insure that all necessary documentation in the chart is completed on a timely basis, and that all required input is there. DON will oversee the work of the Medical Receptionist.

Completion Date: 04/30/2021

Update - 03/29/2021

SP - 03-29-2021 - Home will attempt to have resident #1 sign the support plan by Friday 04-02-2021. If resident refuses or is unable, home will make a notation on support plan.

Document Submission

Implemented

See Medical Receptionist job description attached.

Also, see attachment of signature of resident #1 that was missing.

231c - Preadmission Screening

1. Requirements

2600.

231.c. A written cognitive preadmission screening completed in collaboration with a physician or a geriatric assessment team and documented on the Department's preadmission screening form shall be completed for each resident within 72 hours prior to admission to a secured dementia care unit.

231c - Preadmission Screening (continued)

Description of Violation

Resident #1 was admitted to the Secure Dementia Care Unit (SDCU) on [REDACTED] However, the resident A's written cognitive preadmission screening was not completed.

Resident #2 was admitted to the Secure Dementia Care Unit (SDCU) on [REDACTED] However, the resident A's written cognitive preadmission screening was not completed

Plan of Correction

Accept

A new position was developed, Medical Receptionist. The incumbant in this position will have as the primary responsibility to insure that all necessary documentation in the chart is completed on a timely basis, and that all required input is there. DON will oversee the work of the Medical Receptionist.

Completion Date: 04/30/2021

Update - 03/29/2021

SP - 03-29-2021 - Cognitive preadmission screening to be completed for residents #1 and #2 by Friday 04-02-2021

Document Submission

Implemented

See attached Medical Receptionist job description attached.

See part IV of the Prescreener for Resident #1 and #2