

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

April 17, 2025

[REDACTED]
LIFEQUEST NURSING CENTER
[REDACTED]

RE: THE VILLAGE AT LIFEQUEST
2100 CHERRY BLOSSOM LANE
QUAKERTOWN, PA, 18951
LICENSE/COC#: 14496

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/26/2025 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 VILLAGE AT LIFEQUEST License #: 14496 License Expiration: 11/07/2025
 Address: 2100 CHERRY BLOSSOM LANE, QUAKERTOWN, PA 18951
 County: BUCKS Region: SOUTHEAST

Administrator

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

Legal Entity

Name: LIFEQUEST NURSING CENTER
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: I-2 Date: 10/22/2019 Issued By: Milford Township

Staffing Hours

Resident Support Staff: Total Daily Staff: 141 Waking Staff: 106

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Complaint, Incident Exit Conference Date: 02/26/2025

Inspection Dates and Department Representative

02/26/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 141 Residents Served: 112

Special Care Unit
 In Home: No Area: Capacity: Residents Served:

Hospice
 Current Residents: 6

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 112
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 29 Have Physical Disability: 2

Inspections / Reviews

02/26/2025 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 03/23/2025

03/21/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 04/07/2025
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 03/31/2025

Inspections / Reviews *(continued)*

04/02/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/07/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 04/09/2025

04/17/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/07/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

42b Abuse/Neglect

1. Requirements

2800.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [redacted] at approximately 2:00 PM, Resident [redacted] attempted to purchase Girl Scout cookies and discovered that [redacted] was missing from their purse stored in the top drawer of the nightstand. The resident recalled seeing the money one to two weeks prior. The following day, Resident [redacted] reported the theft to the Sales Director. Information regarding the alleged perpetrator has been provided to the State Police for further investigation.

Repeat violation date: [redacted]

Plan of Correction

Accept [redacted] - 03/21/2025)

On 2/17/25 a resident reported that [redacted] was missing from her wallet to the sales director.

On 2/18/25 the Administrator returned to the community, It was reported to her and

An investigation was launched. The resident was interviewed and family notified.

The administrator notified AAA on 2/18/25 and the incident was reported to the Department. In addition, The State Police were called, and a report was filed

Information for the person of speculation was given to the police.

On 2/19/25, the administrator, notified the Families and residents in the community.

At resident council the administrator talked about the theft and the importance of using the locking drawer in the resident rooms at the February 2025 meeting. In addition, the administrator will hold another resident council meeting in April 2025 to remind them how to avoid financial abuse.

Training was done in January on Abuse and Neglect to the direct care staff.

On 3/26/25, a second refresher training will be completed at this month all staff meeting by the administrator who will discuss the financial abuse situation.

Proposed Overall Completion Date:03/28/2025

Proposed Overall Completion Date: 04/17/2025

Licensee's Proposed Overall Completion Date: 03/28/2025

Implemented [redacted] 04/17/2025)

51 Criminal background checks

2. Requirements

2800.

51.a. 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).

51.b. The hiring policies shall be in accordance with the Department of Aging’s Older Adult Protective Services Act policy as posted on the Department of Aging’s web site.

Description of Violation

Staff Person A, a Texas resident, began working on [redacted], but did not have a criminal background check completed

51 Criminal background checks (continued)

by the PA State Police and FBI prior to their start date.

Staff Person B began working on [REDACTED], but did not have a criminal background check completed by the PA State Police prior to their start date.

Staff Person C began working on [REDACTED], but did not have a criminal background check completed by the PA State Police prior to their start date.

Plan of Correction

Accept (SW - 03/21/2025)

Agency staff were scheduled to come to the community on 2/7/25, 2/11/25 and 11/1/24 Agency staff did have the appropriate background ran.

The community received all the credentials there was notification the PATCH was completed on the paperwork, but the actual PATCH certificate was not attached at the time of the inspection.

The agency has sent over all of the current PATCH certificates for agency staff that is scheduled by 3/1/25.

The appropriate PATCH form and licensing information is now part of the agency staff's information in the contractor binder.

The agency has made the physical form part of the agency staff credentials sent to the community prior to scheduling.

Moving forward the scheduler will always make sure we have all of the PATCH forms before agency will be permitted to work in the community.

The Administrator will audit the contractor binder monthly to ensure the forms are present. starting immediately.

Proposed Overall Completion Date: 3/28/25

Proposed Overall Completion Date: 03/28/2025

Licensee's Proposed Overall Completion Date: 03/28/2025

Implemented ([REDACTED] - 04/02/2025)

54a Direct care staff quals

3. Requirements

2800.

54.a. Direct care staff persons shall have the following qualifications:

- 2. Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry.

Description of Violation

Direct care staff person A, does not have a high school diploma, GED, or active registry status on the Pennsylvania nurse aide registry.

Plan of Correction

Accept ([REDACTED] - 03/21/2025)

Agency staff was scheduled to work in the community and had a current CNA license from Ohio

The particular agency staff will not be returning to the community

Moving forward anyone who is out of state will have a high school diploma along with the other appropriate paperwork to work in the state of PA

The administrator will audit the binder monthly to ensure the correct documentation is present. The administrator

54a Direct care staff quals (continued)

will communicate the Departments requirement to the nursing agency to ensure they schedule qualified substitute staff by 3/28/25.

Proposed Overall Completion Date: 04/17/2025

Licensee's Proposed Overall Completion Date: 03/28/2025

Implemented ([REDACTED] - 04/02/2025)