

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

August 4, 2025

[REDACTED]
SQR OPCO LLC
[REDACTED]

RE: ATRIA LAFAYETTE HILL
9303 RIDGE PIKE
LAFAYETTE HILL, PA, 19444
LICENSE/COC#: 14665

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/10/2025 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: ATRIA LAFAYETTE HILL **License #:** 14665 **License Expiration:** 07/09/2025
Address: 9303 RIDGE PIKE, LAFAYETTE HILL, PA 19444
County: MONTGOMERY **Region:** SOUTHEAST

Administrator

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

Legal Entity

Name: SQR OPCO LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: **Total Daily Staff:** 154 **Waking Staff:** 116

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint, Incident **Exit Conference Date:** 06/10/2025

Inspection Dates and Department Representative

06/10/2025 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 170 **Residents Served:** 111

Secured Dementia Care Unit

In Home: Yes **Area:** Life Guidance **Capacity:** 33 **Residents Served:** 28

Hospice

Current Residents: x

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 111
Diagnosed with Mental Illness: 3 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 43 **Have Physical Disability:** 0

Inspections / Reviews

06/10/2025 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 07/12/2025

07/14/2025 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 08/01/2025
Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 07/19/2025

Inspections / Reviews *(continued)*

07/31/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 08/01/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 08/02/2025

08/04/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/01/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

42c - Treatment of Residents

1. Requirements

2600.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

Resident [redacted] assessment/support plan (RASP), dated [redacted], indicates that the resident needs physical assistance with transfers. On [redacted], around 11:30 PM, resident [redacted] pressed the pendant to request assistance with transferring to the bathroom. After 6 call bell announcements and approximately 20 minutes, staff A arrived to the resident's room, "huffing and puffing" and stating "You all get on my nerves.". While assisting resident [redacted] to change [redacted] clothing, staff A yelled "[redacted] it, you are a pain in my [redacted] about 5 times; [redacted] attitude was described as threatening.

Other residents report that staff members are rude and make the residents feel like they disrupt the staffs' evening when they accidentally press the call bell pendant more than once.

Plan of Correction

Accept [redacted] - 07/31/2025)

On 05/07/2025, the allegation for resident [redacted] was reported to the Montgomery County Area of Aging by [redacted]

On 05/07/2025, the allegation for resident [redacted] was reported to the Department of Human Services by [redacted].

On 05/07/2025, Staff member A was immediately suspended, following the allegation being brought to the attention of Atria.

On [redacted], Staff member A was terminated from Atria Lafayette Hill.

Executive Director/designee will provide training to all staff members on a resident's right; treating residents with dignity and respect, regulation 2600.42C by July 31, 2025.

Beginning on 8/4/2025 and for the next 90 days, Executive Director/designee will ensure that all staff are reminded in weekly stand-up meetings of resident rights and treating residents with dignity and respect, regulation 2600.42C. During these weekly standups, employees will also be educated on the procedure for reporting any suspected occurrence where a resident is not being treated with dignity and respect.

Executive Director and Resident Services Director/Designee will meet weekly to review any and all incidents of alleged violation of resident dignity and respect starting on 08/01/2025 and continuing for the next 90 days to ensure compliance with regulation 2600.42C.

Licensee's Proposed Overall Completion Date: 07/31/2025

Implemented [redacted] 08/04/2025)

65f - Training Topics

2. Requirements

2600.

65.f. Training topics for the annual training for direct care staff persons shall include the following:

1. Medication self-administration training.

65f Training Topics (continued)

Description of Violation

Direct care staff person A did not receive training in medication self administration during training year 2024.

Plan of Correction

Accept ([redacted] - 07/31/2025)

On 6/12/25, Atria training team assigned Pennsylvania Medication Self Administration Annual Training to all direct care staff.

Pennsylvania Medication Self Administration training was added to the Community's annual training calendar and training plan, both of which will be submitted as supporting documents. Atria's internal Quality Enhancement program will audit employee training records 2x per year to ensure compliance with the training plan and calendar. The Executive Director/designee will be responsible for ensuring all employees receive training as outlined on the training plan and calendar, to include direct care staff training on self administration of medication annually.

Starting on 6/12/2025 with a completion date of 7/13/2025 all direct care staff will complete required annual training for medication self administration.

On [redacted], Staff member A was terminated from Atria Lafayette Hill.

On 7/14/2025, Resident Service Director, RSD, and Life Guidance Director, LGD, will audit all direct staff training records to ensure completion of Pennsylvania Medication Self Administration Annual training.

Beginning on 07/15/2025, Executive Director and Resident Services Director/Designee will meet weekly to review that all direct care Pennsylvania Medication Self Administration Annual Training is completed to ensure compliance with regulation 2600.65.f and will continue for the next 90 days.

Licensee's Proposed Overall Completion Date: 07/21/2025

Implemented [redacted] - 08/04/2025)

65g - Annual Training Content

3. Requirements

2600.

65.g. Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:

- 1. Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert. Videos prepared by a fire safety expert are acceptable for the training if accompanied by an onsite staff person trained by a fire safety expert.

Description of Violation

Staff person A did not receive training in Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert during training year 2024.

Plan of Correction

Accept [redacted] 07/31/2025)

On [redacted] Staff member A was terminated from Atria Lafayette Hill.

On [redacted] the Executive Director contacted Fire Life Safety Solutions to schedule fire safety training for all employees.

By, [redacted], our fire safety training will be scheduled for the community, date pending.

65g - Annual Training Content (continued)

The Executive Director (ED) and Maintenance Director will ensure fire safety training is conducted by a fire safety expert and completed annually for all employees. ED will reach out to Fire Safety expert to schedule another training to capture new employees and employees who were unable to attend, date pending.

Fire safety training was added to the Community's annual training calendar and training plan, both of which will be submitted as supporting documents. Atria's internal Quality Enhancement program will audit employee training records 2x per year to ensure compliance with the training plan and calendar. The Executive Director/designee will be responsible for ensuring all employees receive training as outlined on the training plan and calendar, to include all staff training on fire safety annually.

Licensee's Proposed Overall Completion Date: 07/31/2025

Implemented (redacted) - 08/04/2025)

65i - Training Record

4. Requirements

2600.

65.i. A record of training including the staff person trained, date, source, content, length of each course and copies of any certificates received, shall be kept.

Description of Violation

The home's record of direct care staff training does not include length of each course.

Plan of Correction

Accept (redacted) - 07/31/2025)

On 07/02/2025, Executive Director met with the Atria Training team and a process for pulling transcripts with the length of each course was identified.

Effective immediately, all transcripts will be pulled with length of course.

Training records are maintained electronically with length of course as an available data point.

Executive Director has been re-educated on type of transcript required and will ensure all transcripts created from the electronic database contain the length of each course moving forward.

Licensee's Proposed Overall Completion Date: 07/21/2025

Implemented (redacted) - 08/04/2025)