

Department of Human Services  
Bureau of Human Service Licensing

October 29, 2022

[REDACTED]

SENIOR LIVING NP LLC  
501 PLUSH MILL ROAD  
WALLINGFORD, PA, 19086

RE: PLUSH MILLS  
501 PLUSH MILL ROAD  
SECOND AND FOURTH FLOORS  
WALLINGFORD, PA, 19086  
LICENSE/COC#: 13104

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/24/2021, 06/25/2021 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

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

**Facility Information**

Name: *PLUSH MILLS* License #: *13104* License Expiration: *12/09/2021*  
Address: *501 PLUSH MILL ROAD, SECOND AND FOURTH FLOORS, WALLINGFORD, PA 19086*  
County: *DELAWARE* Region: *SOUTHEAST*

**Administrator**

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

**Legal Entity**

Name: *SENIOR LIVING NP LLC*  
Address: *501 PLUSH MILL ROAD, WALLINGFORD, PA, 19086*  
Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *I-2* Date: *11/15/2007* Issued By: *Nether Providence Township, PA*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *76* Waking Staff: *57*

**Inspection Information**

Type: *Full* Notice: *Unannounced* BHA Docket #:  
Reason: *Renewal* Exit Conference Date: *06/25/2021*

**Inspection Dates and Department Representative**

06/24/2021 - On-Site: [REDACTED]  
06/25/2021 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *79* Residents Served: *53*

**Secured Dementia Care Unit**

In Home: *No* Area: Capacity: Residents Served:

**Hospice**

Current Residents: *4*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *53*  
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *23* Have Physical Disability: *0*

## Inspections / Reviews

## 06/24/2021 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *08/29/2021*

## 09/08/2021 - POC Submission

Submitted By: [REDACTED] Date Submitted: *08/26/2021*  
Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *09/11/2021*

## 10/29/2022 - Document Submission

Submitted By: [REDACTED] Date Submitted: *10/24/2022*  
Reviewer: [REDACTED] Follow-Up Type: *Not Required*

185a - Implement Storage Procedures

1. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

On 6/25/21, a small round white pill was found loose in medication cart 2 in the third drawer on the second floor.

On [redacted], resident 1's medication administration record (MAR) was documented as [redacted]

On [redacted] resident 1's Mar was documented as [redacted]

On [redacted] resident 1's MAR was documented as [redacted]

On [redacted], resident 1's [redacted] However this was not notated on the resident's Mar.

On [redacted], resident 1's [redacted] However this was not notated on the resident's Mar.

On [redacted] resident 1's [redacted]. However the MAR was notated as [redacted].

On [redacted], resident 1's [redacted]. However this was notated on the Mar as [redacted]

On [redacted] resident 1's MAR was documented as [redacted] However this reading is not in resident 1's glucometer.

POC Submission

Accept

2600 185 a – Accountability of medication and controlled substances

The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

- [redacted] will be done by the nurse as ordered by the physician. Each nurse will follow the five rights of medication administration.
- Each resident has their own [redacted] and tote. Each [redacted] and the time taken
- Nurse will review [redacted] reading before documenting on the electronic record (Nurses were in-serviced)

185a - Implement Storage Procedures (continued)

Nurses & med-techs were in-serviced to check and observe for any loose pills that are in the cart.

Licensee's Proposed Overall Completion Date: 06/28/2021

Document Submission

Implemented [redacted] - 10/29/2022)

See attached.

Licensee's Proposed Overall Completion Date: 10/24/2022

187b - Date/Time of Medication Admin.

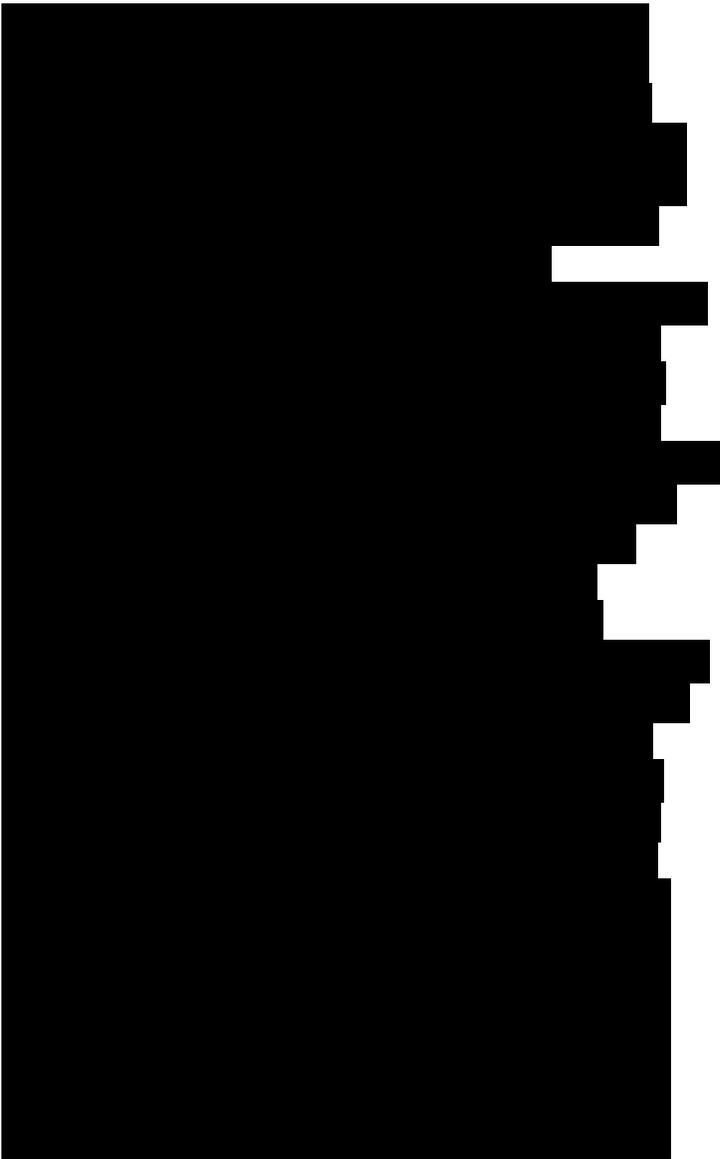
2. Requirements

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

Resident 1's Medication Administration Record has omissions and does not include the initials of the staff person administering the medications for the following dates and times as specified below:



187b - Date/Time of Medication Admin. (continued)



**POC Submission**

**Accept**

2600 187b Medication Records

The information in subsection (a) (13) and (14) shall be recorded at the time the medication is administered.  
When a resident is out of the community for any reason, it must be documented and not left blank.  
There is a list of codes that should be used.  
(med techs & nurses were in-serviced)

Licensee's Proposed Overall Completion Date: 06/28/2021

**Document Submission**

**Implemented** - 10/29/2022

See attached.

Licensee's Proposed Overall Completion Date: 10/24/2022