



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**  
**MAILING DATE: APR. 13, 2015**

Ms. Dania West, Person Care Administrator  
Philadelphia Presbytery Homes, Inc.  
2000 Joshua Road  
Lafayette Hill, Pennsylvania 19444

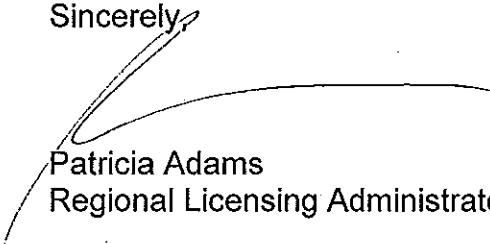
RE: Rydal Park Person Care  
1515 The Fairway  
Rydal, Pennsylvania 19046  
License #: 13812

Dear Ms. West:

As a result of the Department of Human Services' licensing inspection on January 22, 2015 and January 23, 2015 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,



Patricia Adams  
Regional Licensing Administrator

Enclosure  
Licensing Inspection Summary

**VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

Page 1 of 2

PCH Name: RYDAL PARK PERSONAL CARE		License Number: 13812
Address: 1515 THE FAIRWAY, RYDAL, PA 19046		County: Montgomery
Administrator: Dania West		Region: SOUTHEAST
Legal Entity Name: PHILADELPHIA PRESBYTERY HOMES INC		
Legal Entity Address: 2000 JOSHUA ROAD, LAFAYETTE HILL, PA 19444		
Certificate(s) of Occupancy		
<b>Staffing Hours</b>		
Resident Support: 0	Total Dally Staff: 74	Waking Staff: 56
Type of Inspection: Interim - POC	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Interim		
On-Site Inspections Dates and Department Representatives On-Site		
Off-Site Inspection Dates and Inspectors, if Applicable 01/22/2015: Kazimer, Lauren 01/23/2015: Kazimer, Lauren		
<b>Other Details</b>		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 72 Number of Residents Served: 48 Secured Dementia Care Unit In Home: Yes Area: Secured Dementia Unit Capacity, If Applicable: 23 Number of Residents Served in Secured Dementia Care Unit, if applicable: 18 Number of Current Hospice Residents: 3 Number of Hospice Residents in past year: 10	<b>Number of Residents who:</b> Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 48 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 26 Have a Physical Disability: 0	

Violation Report: 13812 - 01/22/2015 - Kazimer, Lauren  
 PCH Name: RYDAL PARK PERSONAL CARE

**1. REGULATION 55 Pa.Code §2600**

2600.187(b) - The information in § 2600.187(a)(13) and § 2600.187(a)(14) shall be recorded at the time the medication is administered.

**2a. DESCRIPTION OF VIOLATION**

Resident # 1's wound treatment was not initiated by staff at the time of administration.

**3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)**

*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

Re: Regulation 2600.187(b). The information in 2600.187(a)(13) and 2600.187(a)(14).

Resident # 1 Treatment order sheet was immediately reviewed and double check system put in place. (See attached exhibit A).

Going forward, when a treatment order is received, the nurse manager will ensure that the treatment order is noted on the computer and a double check system in place. The administrator will ensure that all treatment order are initiated by the staff at the time of administration.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) Dania West

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Dania West, Personal Care Administrator Date 3/6/2015

**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of 3/30/15 (Date)

The above plan of correction was approved by [Signature] (Initials)

Plan of correction implementation status as of 3/30/15 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented