



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAR 03 2016

Ms. Mary McGoldrick, Administrator
Dunwoody Village, Inc.
Attn: Personal Care Services
3500 West Chester Pike
Newtown Square, Pennsylvania 19073

RE: Dunwoody Village
License #: 145250

Dear Ms. McGoldrick:

As a result of the Department of Human Services' annual licensing inspection on October 14, 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,

A handwritten signature in black ink that reads "Matthew J. Jones".

Matthew J. Jones
Director

Enclosure
License Inspection Summary

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

POH Name: DUNWOODY VILLAGE		License Number: 14525
Address: 3500 WEST CHESTER PIKE, NEWTOWN SQUARE, PA 19073		County: Delaware
Administrator: Mary McGoldrick		Region: SOUTHEAST
Legal Entity Name: DUNWOODY VILLAGE INC		
Legal Entity Address: 3500 WEST CHESTER PIKE, NEWTOWN SQUARE, PA 19073		
Certificate(s) of Occupancy C-1 01/30/2002 PA Dept of Health		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 101	Working Staff: 78
Type of Inspection: Full	BHA Booklet Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal, Complaint		
On-Site Inspection Dates and Department Representatives On-Site 10/14/2016: Keelly, Jennifer; Braswell, Nataaha		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 81	Number of Residents who:	
Number of Residents Served: 78	Receive Supplemental Security Income: 0	
Secured Dementia Care Unit In Home: Yes	Are 60 Years of Age or Older: 78	
Area: Cedars West	Have Mental Illness: 3	
Secured Dementia Unit Capacity, if Applicable: 20	Have an Intellectual Disability: 0	
Number of Residents Served in Secured Dementia Care Unit, if applicable: 19	Have a Mobility Need: 23	
Number of Current Hospice Residents: 3	Have a Physical Disability: 0	
Number of Hospice Residents in past year: 9		

Violation Report: 14525 - 10/14/2015 - Keally, Jennifer
PCH Name: DUNWOODY VILLAGE

1. REGULATION 66 Pa.Code §2600
2600.86(a) - Sanitary conditions shall be maintained.

2a. DESCRIPTION OF VIOLATION
Staff Member A reported that the home instructed staff to utilize a house glucometer if test strips are not available for an individual resident.

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.

See attached

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page) *Mary McGoldrick PCA*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *MARY McGoldrick* Date *11.30.15*

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

The above plan of correction is approved as of *12/15/15*
(Date)

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

Plan of correction implementation status as of *12/15/15*
(Date)

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

POC

Regulation 55 PA. Code 2600.85(a)

Staff member A reported that the home instructed staff to utilize a house glucometer if test strips are not available for an individual.

It has been the policy of Dunwoody Village PC for all diabetic residents who are ordered accu checks to have their own glucometer.

Immediately a new glucometer and strips were provided to this resident.

All residents have their own glucometer marked with their name and room number. Additional glucometers were ordered so that residents have a back-up glucometer if needed.

Nurses will be in-serviced on this policy and the importance of ensuring residents have their own personal glucometers and sufficient supplies of test strips.

Policy was posted in the four medication rooms for nurses to read.

An article regarding this policy will be placed in the monthly nursing publication *Care Capsule*.

Weekly audits will be conducted to ensure compliance- each resident has their own glucometer and that it is marked with resident's name and room number. Nurses will conduct weekly audits to ensure each resident has his/her own glucometer and that there is a sufficient supply of test strips. Nurses will perform these audits weekly and provide these audits to the PC Administrator on a monthly basis. The results of these audits will be discussed at the monthly Quality First meetings.

Steps to be completed by 12/31/2015

License # 145250

Violation Report: 14528 - 10/14/2015 - Kaelly, Jennifer
FCH Name: DUNWOODY VILLAGE

1. REGULATION 88 Pa.Code §2800
2800.184(b) - If the OTC medications and CAM belong to the resident, they shall be identified with the resident's name:

2a. DESCRIPTION OF VIOLATION
On 10/14/2015, a package of Docusate Sodium, 100 mg, belonging to Resident # 1 was located in the medication cart and was not labeled with the resident's name.

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.

See attached

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page) *Mary M. Goldrick PCA*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *MARY M Goldrick* Date *11-30-15*

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

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Regulation 55 PA. Code 2600.184(b)

On 10/14/2015 a package of docusate sodium 100 mg and a CAM (complementary alternative medicine) belong to the resident #1 was located in the medication cart and not labeled with the resident's name.

Immediately the bottles were marked with the resident's name and room number.

Immediately all OTC medications on the four nursing units were audited to ensure correct labeling for safety.

Dunwoody's policy for labeling of over the counter medications was posted in the four medication rooms.

Nurses will be in-serviced on the correct labeling of medications and why this is so important (prevention of medication errors)

An article regarding this policy will be placed in the next monthly nursing publication *Care Capsule*.

Weekly audits will be conducted to ensure compliance- OTC/CAM medications brought in by families must be labeled with the resident's name and room number. Nurses will perform these audits weekly and provide these audits to the PC Administrator on a monthly basis. The results of these audits will be discussed at the monthly Quality First meetings.

Steps to be completed by 12/31/2015

License # 14525

Violation Report: 14525 - 10/14/2015 - Keally, Jennifer
PCH Name: DUNWOODY VILLAGE

1. REGULATION 66 Pa.Code §2600
2600.186(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. *See attached*

2a. DESCRIPTION OF VIOLATION
On 10/14/2015, Resident # 2's glucometer memory was not properly calibrated. *See attached*

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.

See attached

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Printed Name and Title of Legal Entity Representative
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(Initials)

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Regulation 55 PA. Code 2600.185 (a)

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

Resident #2's glucometer memory was not properly calibrated.

Resident #2's was given a new glucometer immediately and it was calibrated correctly.

Printed instructions were posted in the four medication rooms. A YouTube video showing the calibration of this glucometer was shared with nursing staff.

All staff will be in-serviced regarding the calibration of residents' glucometers.

An article regarding this policy will be placed in the next monthly nursing publication *Care Capsule*.

Nurses will conduct weekly audits on resident glucometers to ensure they are calibrated with correct date/time and that we are in compliance. Nurses will perform these audits weekly and provide these audits to the PC Administrator on a monthly basis. The results of these audits will be discussed at the monthly Quality First meetings.

Steps to be completed by 12/31/2015

Lecina # 145250

Violation Report: 14626 - 10/14/2016 - Keelly, Jennifer
PCH Name: DUNWOODY VILLAGE

1. REGULATION 65 Pa.Code §2600
2600.187(d) - The home shall follow the directions of the prescriber.

2a. DESCRIPTION OF VIOLATION
Resident # 1 has an order for Ferrous Gluconate, 326 mg. The home has been administering 240 mg.

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.

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Regulation 55 PA. Code 2600.187 (d)

The home shall follow the directions of the prescriber.

Resident #1 had an order for Ferrous Gluconate 325 mg. The home had been administering 240 mg.

Immediately correct mg dose of Ferrous Gluconate replaced the incorrect mg dose.

Nurses will be educated on policy requiring nursing staff to check that the medication the family supplies is the:

Correct resident's name and room number

Correct medication

Correct dose

Correct route

The nurse is to ensure that the medication, dose, and route match the physician's order accurately.

All nurses will be educated regarding this policy

An article regarding this policy will be placed in the next monthly nursing publication *Care Capsule*.

Weekly audits will be conducted to ensure compliance- OTC medications brought in by families will accurately match the physician's order for the medication (medication, dose, and route). Nurses will conduct weekly audits to ensure there is compliance and provide these audits to the PC Administrator on a monthly basis. The results of these audits will be discussed at the monthly Quality First meetings.

Steps to be completed by 12/31/2016

Lucina # 145250