



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

MAR 30 2016

Mr. Benjamin J. Hoyle, CEO  
Pennswood Village  
1382 Newtown-Langhorne Road  
Newtown, Pennsylvania 18940

RE: Pennswood Village Personal Care Home  
License #: 126750

Dear Mr. Hoyle:

As a result of the Department of Human Services' annual licensing inspections on October 29, 2015, October 30, 2015 and December 22, 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 cursive script that reads "Matthew J. Jones".

Matthew J. Jones  
Director<sup>/s/</sup>

Enclosure  
License Inspection Summary



Violation Report: 12676 - 10/29/2015 - Keelly, Jennifer  
PCH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.25(b) - The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

2a. DESCRIPTION OF VIOLATION

The contract for Resident # 1 was not signed by the administrator or designee.

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.*

On 10/30/2015 all current contracts were reviewed to ensure the administrator and or designee signature is present. Moving forward the administrator will audit the charts quarterly to ensure compliance. The home is in compliance with regulation 2600.25(b)

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

Signature of Legal Entity Representative  
(Required on EVERY Page) *Daniella Pantar*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Daniella Pantar*      Date *11/25/15*

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

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

The above plan of correction was approved by *GPB*  
(Initials)

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

Violation Report: 12675 - 10/29/2015 - Koolly, Jennifer  
PCH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME

1. REGULATION 56 Pa.Code §2600

2600.65(a) - Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following:

- (1) Evacuation procedures.
- (2) Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable.
- (3) The designated meeting place outside the building or within the fire-safe area in the event of an actual fire.
- (4) Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable.
- (5) The location and use of fire extinguishers.
- (6) Smoke detectors and fire alarms.
- (7) Telephone use and notification of emergency services.

2a. DESCRIPTION OF VIOLATION

Staff Person A, whose first day of work was 4/6/2016, did not receive orientation in any general fire safety and emergency preparedness topics prior to or during the first work day.

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.

The regulation was reviewed with the Human Resources and maintenance departments. All 7 topics have been added to all new hires curriculum. Moving forward the administrator and or designee and the department heads will monitor to ensure compliance. The home is in compliance with regulation 2600.65(a)

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
(Required on EVERY Page) *Daniella Pantal*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Daniella Pantal* Date *11/25/15*

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(Initials)

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Violation Report: 12675 - 10/29/2015 - Keely, Jennifer  
 PCH Name: PENNSWOOD-VILLAGE PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600  
 2600.65(b) - Within 40 scheduled working hours, direct care persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following:  
 (1) Resident rights.  
 (2) Emergency medical plan.  
 (3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (36 P.S. §§ 10225.101-10225.5102).  
 (4) Reporting of reportable incidents and conditions.

2a. DESCRIPTION OF VIOLATION  
 Ancillary Staff Person A, hired on [redacted] 2015, did not receive orientation on Residents Rights until 6/22/2016 or mandatory reporting of abuse and neglect under the Older Adult Protective Services Act until 7/16/2015.

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.

The regulation was reviewed with the Human Resources and maintenance departments. The listed topics and completion timeline have been added to all new hires curriculum. Moving forward the administrator and or designee and the department heads will monitor to ensure compliance. The home is in compliance with regulation 2600.65(a)

*The administrator will review all new employee training records before they provide care to the residence to ensure the required 1st day of hire training has been completed, starting within 30 days of receipt of this plan of correction. (SW)*

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

Signature of Legal Entity Representative (Required on EVERY Page) *Daniella Pantal*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Daniella Pantal*      Date *11/25/15*

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Violation Report: 12676 - 10/29/2015 - Koelly, Jennifer  
PCH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME

1. REGULATION 68 Pa.Code §2600  
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.
  - (2) Emergency preparedness procedures and recognition and response to crises and emergency situations.
  - (3) Resident rights.
  - (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101-10225.6102).
  - (5) Falls and accident prevention.
  - (6) New population groups that are being served at the home that were not previously served, if applicable.

2a. DESCRIPTION OF VIOLATION  
Direct care Staff Person B did not receive training on fire safety in the 2014 training year DOH- [redacted] 1994.

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.

The regulation was reviewed with the Human Resources and maintenance departments. All the listed topics have been added to all new hires curriculum. Moving forward the administrator and or designee and the department heads will monitor to ensure compliance. The home is in compliance with regulation 2600.65(a)

The administrator or designee will check training records of all staff bi-annually to ensure all required trainings are completed annually, starting within 30 days of receipt of this plan of correction.

Repeat Violation: Yes	Date(s) of Previous Violation(s)	07/22/2015
Signature of Legal Entity Representative (Required on EVERY Page)		
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)		Date
Daniella Pantal		11/25/15
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Violation Report: 12676 - 10/29/2015 - Kealty, Jennifer  
 PCH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600  
 2600.183(d) - Only current prescription, OTC, sample and GAM for individuals living in the home may be kept in the home

2a. DESCRIPTION OF VIOLATION

On 10/29/2015, the following expired medications were located in a vehicle's first aid kit:  
 Tylenol Extra Strength, 500 mg, expired May 2008  
 Motrin IB, 200 mg, expired February 2008  
 Immodium, 2 mg, expired March 2008  
 Band-Aid brand antibiotic ointment, expired June 2008

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.*

The OTCs were removed immediately. The regulation was reviewed with the Transportation department manager. Moving forward, the transportation manager and or designee will inspect the vehicles to monitor compliance. The PCA will also randomly monitor to ensure compliance. The home is in compliance with regulation 2600.183(d)

Repeat Violation: No	Date(s) of Previous Violation(s):		
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 (Required on EVERY Page) *Daniella Pantel*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Daniella Pantel* Date *11/25/15*

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Violation Report: 12876 - 10/29/2016 - Keally, Jennifer  
 PCH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2800  
 2800.187(a) - A medication record shall be kept to include the following for each resident for whom medications are administered:  
 (1) Resident's name.  
 (2) Drug allergies.  
 (3) Name of medication.  
 (4) Strength.  
 (5) Dosage form.  
 (6) Dose.  
 (7) Route of administration.  
 (8) Frequency of administration.  
 (9) Administration times.  
 (10) Duration of therapy, if applicable.  
 (11) Special precautions, if applicable.  
 (12) Diagnosis or purpose for the medication, including pro re nata (PRN).  
 (13) Date and time of medication administration.  
 (14) Name and initials of the staff person administering the medication.

2a. DESCRIPTION OF VIOLATION  
 Resident # 2 has an order for Refresh Tears, one drop in each eye, four times a day. The medication administration record states three times a day.

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.

The resident was receiving the correct dosage. The medication administration record was corrected immediately prior to the surveyors exiting. On 11/22/15 all current residents' medication administration record was audited. Moving forward the administrator and or designee will monitor for transcription errors during audits. The home is in compliance with regulation 2600.187 (a)

*The administrator or designee will conduct monthly recaps of the MAR to ensure the correct dosage & times of administration are correct for all residents, starting within 30 days of receipt of this plan of correction.*

Repeat Violation: Yes	Date(s) of Previous Violation(s):	10/30/2014
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Signature of Legal Entity Representative.  
 (Required on EVERY Page) *Daniella Pantale*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Daniella Pantale* Date *11/25/15*

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Violation Report: 12876 - 10/29/2015 - Keely, Jennifer  
PCH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

2600.190(a) - A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

2a. DESCRIPTION OF VIOLATION

Staff Members B, C, D, E, F, G, H, I, J, K, L, and M have all administered medications to residents in the month of October 2015. None of these staff members have been trained in accordance with the Department-approved medications administration course.

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.*

The home's trainer who has successfully completed the class will train the cited med techs as soon as able. Technical difficulty with Temple University's site is delaying the process. The home respectfully asks that regulation 2600.190(a) be removed from the violation report. Moving forward the home will partner with other communities to ensure continuum with the training. The home is currently in compliance with regulation 2600.190(a).

*The administrator or designer will develop a tracking system to insure that all staff that administer medications have received the Department approved training prior to administering medications and have completed the annual practicum, starting within 30 days of receipt of this plan of correction.*

*The administrator or designer will review the medication training of staff that administrator needs to ensure all required processes of the training have been completed, at least bi-annually, starting within 30 days of receipt of this plan of correction.*

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*(Required on EVERY Page)* *Daniella Pantar*

Printed Name and Title of Legal Entity Representative  
*(Required on EVERY Page)* *Daniella Pantar*      Date *11/25/15*

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Violation Report: 12676 - 10/29/2015 - Kealty, Jennifer  
PCH Name: PENNSWOOD VILLAGE PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600  
2600.227(g) - Individuals who participate in the development of the support plan shall sign and date the support plan.

2a. DESCRIPTION OF VIOLATION  
Resident # 4's assessment and support plan, dated 6/26/2015, was not signed by the assessor or the 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.

On 10/30/15 all current service plans were reviewed, signed by the assessor and the residents.  
Moving forward the administrator and or designee will monitor during quarterly audits to ensure compliance. The home is in compliance with regulation 2600.227(g)

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Signature of Legal Entity Representative  
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