



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAR 10 2017

Ms. Mary McGoldrick, PCA
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 inspections on October 12, 2016 and October 13, 2016 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.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Rowe'.

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

Violation Report: 14525 - 10/12/2016 - Gray, Dean
 PCH Name: DUNWOODY VILLAGE.

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 contracts for resident # 1, # 2 and # 3 were not signed by the residents.

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.

Date Correction will be completed - 1-14-2017.

Plan of correction:

1. All residents will be asked to sign their contracts.
2. If a resident is unable or refuses to sign their contract, documentation will be noted on the contract signature page by either the PCA /Designee.
3. Notation now included on the contract signature page to document if the resident is unable to sign or refuses to sign.

*staff will be trained within 30 days
 receipt of approved POC @
 the administrator is responsible for
 continued compliance @*

Repeat Violation: No	Date(s) of Previous Violation(s):		
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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) <i>MARY M Goldrick</i>	Date <i>12-16-16</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>12/20/16</u> (Date)	Plan of correction implementation status as of <u>12/20/16</u> (Date)
The above plan of correction was approved by <u><i>MD</i></u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 14525 - 10/12/2016 - Gray, Dean
 PCH Name: DUNWOODY VILLAGE

1. REGULATION 55 Pa.Code §2600

2600.41(e) - A statement signed by the resident and, if applicable, the resident's designated person acknowledging receipt of a copy of the information specified in § 2600.41(d), or documentation of efforts made to obtain signature, shall be kept in the resident's record.

2a. DESCRIPTION OF VIOLATION

Resident # 1's, # 2's, and # 3's records did not contain a statement signed by the residents acknowledging receipt of a copy of the resident rights and complaint procedures.

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.

Date of correction will be completed – 1-14-2017.

Plan of correction:

1. All residents receive an acknowledgment of admission paperwork form upon admission to Dunwoody Village Personal Care.
2. All residents will be asked to sign the acknowledgment of admission paperwork form and placed in the residents chart.
3. A resident's refusal or inability to sign will be documented on the contract signature page.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page)	<i>Mary M Goldrick PCA</i>
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
<i>Mary M Goldrick</i>	<i>12-16-16</i>

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 (Date)

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 (Initials)

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- Not Implemented

Violation Report: 14525 - 10/12/2016 - Gray, Dean
 PCH Name: DUNWOODY VILLAGE

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

2a. DESCRIPTION OF VIOLATION
 Resident # 4's medications, MAPAP 325 MG was discontinued on 10/12/16 and Metamucil was discontinued on 10/05/16. However, on 10/13/16, the medications were still listed on the medication administration record (MAR).

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.

Date of correction will be completed – immediately

Plan of correction:

1. Resident #4's discontinued medications orders were immediately corrected.
2. A Personal Care 11pm-7am Chart audit will be done each night by the charge nurse on all personal care charts.
3. Audit includes New/ Discontinued Orders and Discontinued Meds removed from med cart?
 Yes/ No..
4. 11p-7am Chart Audit was implemented on 12-1-2016.
5. The audit will be placed on the 24 hour report and the day shift nurse will review and notify the PCA/Designee if a discrepancy is observed.
6. Any discrepancies will be addressed immediately.

audits will be documented and maintained for the Department. (M)

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

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Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Mary M Goldrick* Date *12-16-16*

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Violation Report: 14525 - 10/12/2016 - Gray, Dean
 PCH Name: DUNWOODY VILLAGE

1. REGULATION 55 Pa.Code §2600
 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.

2a. DESCRIPTION OF VIOLATION
 On 10/13/16, The home did not have the following pro re nata (PRN) medications available to administer:

- Resident # 3: Bisac-Evac 10 MG
- Resident # 4: Fluticasone 50 MCG and MAPAP 325 MG
- Resident # 5: Albuterol Sulfate 2.5 MG / 3 ML, Artificial Tears 1.04 % and Guaiifensin 100 MG / 5 ML

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.

Date of correction will be completed – immediately

Plan of correction:

1. The PRN medications not available for residents #3, # 4 and # 5 were delivered by the pharmacy by the end of the day of when observed missing in the medication cart.
2. A Personal Care PRN Medication Audit was developed and will be done every Thursday on each PC unit by the day shift and middle shifts nurses starting 12-1-2016. Nurses will provide these audits to the Administrator on a monthly basis for 3 months.
3. Staffs have been educated on this PRN Medication Audit form.

written documentation of audit will be maintained for the Department

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Violation Report: 14525 - 10/12/2016 - Gray, Dean
 PCH Name: DUNWOODY VILLAGE

1. REGULATION 55 Pa.Code §2600
 2600.191 - The home shall educate the resident on the right to question or refuse a medication if the resident believes there may be a medication error. Documentation of this resident education shall be kept.

2a. DESCRIPTION OF VIOLATION
 Resident # 1, # 2, # 3, # 4, and # 5 have not been educated to the resident's right to refuse medication if the resident believes that there may be a medication error.

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.

Date of correction will be completed – 1-14-2017.

Plan of correction:

1. All residents will receive a form upon admission to Dunwoody Village Personal Care that educates them on their right of refusal of medication in accordance with regulation 2600.191.
2. All residents will be asked to sign the form on admission and form will be placed in the residents chart.
3. A resident's refusal or inability to sign will be documented on the form.

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 (Required on EVERY Page) *MARY M Goldbrick* Date *12-16-16*

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Violation Report: 14525 - 10/12/2016 - Gray, Dean
 PCH Name: DUNWOODY VILLAGE

1. REGULATION 55 Pa.Code §2600

2600.231(e) - Each resident record shall have documentation that the resident and the resident's designated person have not objected to the resident's admission or transfer to the secured dementia care unit.

2a. DESCRIPTION OF VIOLATION

Resident # 1 was admitted to the SDCU on [REDACTED] 16. The home has no documentation that the resident and the resident's designated person have not objected to the admission.

Resident # 2 was admitted to the SDCU on [REDACTED] 16. The home has no documentation that the resident and the resident's designated person have not objected to the admission.

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.

Date of correction will be completed -immediately

Plan of correction:

1. All residents and the resident's designated person will be asked to sign a Release for Secure Unit form.
2. This form will be kept on the resident's chart.
3. A resident's refusal or inability to sign will be documented on the form.


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MARY M Goldrick	12-16-16

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Violation Report: 14525 - 10/12/2016 - Gray, Dean
 PCH Name: DUNWOODY VILLAGE

1. REGULATION 55 Pa.Code §2600

2600.233(c) - If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

2a. DESCRIPTION OF VIOLATION

On 10/13/16, the directions for operating the home's locking mechanism was not conspicuously posted near the SDCU's courtyard gate.

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.

Date of correction will be completed – immediately

Plan of correction:

1. The directions for operating Dunwoody Village personal care SDCU's locking mechanism were immediately posted near the SDCU's courtyard by our maintenance department.
2. The directions for operating the SDCU's locking mechanism will be permanently posted.

The administrator shall be responsible for continued compliance

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