



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

FEE 0 3 2017

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

RE: Rydal Park Personal Care  
1515 The Fairway  
Rydal, Pennsylvania 19046  
License #: 138120

Dear Ms. West:

As a result of the Department of Human Services' annual licensing inspection on November 1, 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.

Sincerely,

A handwritten signature in black ink that reads 'J. Rowe'.

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary



Violation Report: 13812 - 11/01/2016 - Colon, Lissette  
 PCH Name: RYDAL PARK PERSONAL CARE

1. REGULATION 55 Pa.Code §2600

2600.65(f) - Training topics for the annual training for direct care staff persons shall include the following:

- (1) Medication self-administration training.
- (2) Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
- (3) Care for residents with dementia and cognitive impairments.
- (4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
- (5) Personal care service needs of the resident.
- (6) Safe management techniques.
- (7) Care for residents with mental illness or mental retardation, or both, if the population is served in the home.

2a. DESCRIPTION OF VIOLATION

The annual training provided to direct care staff person A, in training year 2015, did not include the following topics,

- Medication self-administration
- Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation, and support plan

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 2600.65(F)  
 Staff person A is prn. Staff person A will not be scheduled to work until she have completed all her annual training (Please see attachment 1).

Going forward all annual training will be scheduled on a monthly basis to allow for completion by everyone. The Personal Care Administrator will monitor compliance. Those who fail to complete the yearly training will not be put on the schedule until they have completed the training. The Home Quality Management program will include continuing review for compliance

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

Signature of Legal Entity Representative (Required on EVERY Page) Dania West

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) PC Administrator Date 11/24/2016  
Dania West

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

The above plan of correction is approved as of 11/30/16  
 (Date)

Plan of correction implementation status as of 11/24/16  
 (Date)

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

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

Violation Report: 13812 - 11/01/2016 - Colon, Lissette  
 PCH Name: RYDAL PARK PERSONAL CARE

1. REGULATION 55 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. §§ 10225.101-10225.5102).
- (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 member A, did not receive training in Fire Safety during training year 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.

Re: Regulation 2600:65(9).  
 Staff person A works prn. Staff person A will not be scheduled to work in PC until she have completed annual fire training.  
 (Please see attachment 2)

Going forward annual fire safety training with the fire safety expert will be scheduled on a quarterly basis to allow for completion by everyone. The Personal Care Administrator will monitor compliance. Those who fail to complete the training for the year, will not be put on the schedule until they have completed the training. The ~~com~~ home quality management program will include a continuing review to ensure compliance

Repeat Violation: Yes	Date(s) of Previous Violation(s):	11/10/2015
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page) PC Administrator  
Dania West Date 11/24/2016

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Violation Report: 13812 - 11/01/2016 - Colon, Lissette  
 PCH Name: RYDAL PARK PERSONAL CARE

1. REGULATION 55 Pa.Code §2600  
 2600.103(d) - Food shall be stored off the floor.

2a. DESCRIPTION OF VIOLATION  
 On 11/1/16, a box of frozen green peas was stored on the floor in the walk-in freezer that is located on the ground level of the building.

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: 103(d).  
 The box of frozen green peas was immediately disposed off. Staff was immediately inserviced.  
 (Please see attachment 3).

Going forward monthly audit will be done by The Dining Services Director and Nutrition Care Manager. The Personal Care Administrator will monitor compliance.

The Home Quality Management program will include a continuing review to ensure that compliance of this regulation is maintained (please see attachment 4).

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

Signature of Legal Entity Representative (Required on EVERY Page) *Dania West*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *PC Administrator*  
*Dania West*      Date *11/24/2016*

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Violation Report: 13812 - 11/01/2016 - Colon, Lissette  
 PCH Name: RYDAL PARK PERSONAL CARE

1. REGULATION 55 Pa.Code §2600  
 2600.103(e) - Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

2a. DESCRIPTION OF VIOLATION  
 On 11/1/16, the following food items were inside the main-kitchen walk-in freezer not labeled or dated,  
 - Two bags of french fries.  
 - One bag of sweet potato fries  
 - One bag of hamburger

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.*

*2600. Re: Regulation: 103(e). Food items found not labeled or dated was immediately disposed off. Staff was inserved and audit done. (Please see attachment 3 and attachment 4)*

*Going forward monthly audits will be conducted by The Dining Services Director and the Nutrition Care Manager. The Personal Care Administrator will monitor compliance. The Home Quality Management Program will include a continuing review to ensure compliance of this regulation.*

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

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 PC Administrator*      Date *11/24/2016*

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Violation Report: 13812 - 11/01/2016 - Colon, Lissette  
 PCH Name: RYDAL PARK PERSONAL CARE

1. REGULATION 55 Pa.Code §2600  
 2600.103(g) - Food shall be stored in closed or sealed containers.

2a. DESCRIPTION OF VIOLATION  
 A 3lb. jar of fresh mozzarella inside in the main kitchen refrigerator was opened and unsealed.

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 103(g). The jar of fresh mozzarella was immediately disposed of. Staff was inserviced and audit done. (Please see attachment 3 and attachment 4).

Going forward monthly audits will be conducted by the Dining Services Director and the Nutrition Care Manager. The Personal Care Administrator will monitor compliance. The Home Quality Management Program will include a continuing review to ensure compliance of this regulation.

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

Signature of Legal Entity Representative (Required on EVERY Page) *PC Administrator*  
*Dania West*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *PC Administrator*  
*Dania West*      Date *11/24/2016*

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