



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

OCT 04 2017

Ms. Francie K. Hoch,  
Executive Director  
Greenfield of Perkiomen Valley, LLC  
6312 Seven Corners Center 161  
Falls Church, Virginia 22044

RE: Greenfield of Perkiomen Valley  
300 Perkiomen Avenue  
Schwenksville, Pennsylvania 19473  
License #: 137350

Dear Ms. Hoch:


As a result of the Department of Human Services' annual licensing inspections on June 7, 2017 and June 8, 2017 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](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,

  
Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary



Violation Report: 13735 - 06/07/2017 - Braswell, Natasha  
 PCH Name: GREENFIELD OF PERKIOMEN VALLEY

1. REGULATION 55 Pa.Code §2600  
 2600.42(b) - A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

2a. DESCRIPTION OF VIOLATION  
 Staff person A reportedly told Resident #1 to, "sit down and shut up" and called the resident stupid. This occurred while the resident was looking for her glasses.

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.

*Please see attached.*

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *Francie K. Hoch*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Francie K. Hoch, Executive Director* Date *8-8-17*

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

The above plan of correction is approved as of <u>8/11/17</u> (Date)  The above plan of correction was approved by <u><i>FW</i></u> (Initials)	Plan of correction implementation status as of <u>8/15/17</u> (Date)  <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
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Plan of Correction  
Greenfield Senior Living,  
Perkiomen Valley  
License#137350

1. **Regulation 2600.42(b):** A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.
2. **Citation:** Staff person A reportedly told Resident #1 to, "sit down and shut up" and called the resident stupid. This occurred while the resident was looking for her glasses.
3. **Plan of Correction:**
  - The employee in question was immediately suspended pending the investigation of letter written by staff to manager reporting the mistreatment.
  - Three employees interviewed corroborated the letter and the employee in question was terminated.
  - Each new employee is trained in Resident Rights and Act 13 Abuse Reporting during Orientation, prior to working by both the Business Office Manager and the Executive Director.
  - During each staff meeting beginning with July, we have gone back to reciting the Greenfield Mission Statement and Values statements as a way to discuss and remind all staff why we do what we do and the importance of demonstrating dignity and integrity at all times.
  - As part of our quality management, all manager's will interview new employees in their department regarding the care of residents, within their first 30 days and then a random sampling of 15 employees will be chosen quarterly to complete the questionnaire. See attached questionnaire. This has been implemented effective August 1, 2017.

 Francis Hoch, 8-8-17

Violation Report: 13735 - 06/07/2017 - Braswell, Natasha  
 PCH Name: GREENFIELD OF PERKIOMEN VALLEY

1. REGULATION 55 Pa.Code §2600

2600.85(d) - Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

2a. DESCRIPTION OF VIOLATION

The trash can in the shared bathrooms of rooms #319 and #302 did not have a lid.

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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 (Date)

Plan of correction implementation status as of 8/14/17  
 (Date)

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

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

Plan of Correction  
Greenfield Senior Living,  
Perkiomen Valley  
License#137350

1. Regulation 2600.85(d): Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.
2. Citation: The trashcan in the shared bathrooms of rooms #319 and #302 did not have a lid.
3. Plan of Correction:
  - The trashcans were removed immediately on June 8, 2017. On June 9, new trashcans were purchased and placed in all shared bathrooms.
  - The employees in the housekeeping department were re-trained on this issue and they now inspect trashcans in kitchen and bathroom areas for lids during weekly housekeeping of resident rooms.
  - Care Managers were also re-trained on this issue and they now inspect trashcans in kitchen and bathroom areas for lids during daily trash removal.

*Francis Holt, 8-8-17*

Violation Report: 13735 - 06/07/2017 - Braswell, Natasha  
 PCH Name: GREENFIELD OF PERKIOMEN VALLEY

1. REGULATION 55 Pa.Code §2600  
 2600.89(b) - Hot water temperature in areas accessible to the resident may not exceed 120°F.

2a. DESCRIPTION OF VIOLATION  
 On 6/8/17, at 10:20 am the water temperature at the faucet located in the bathroom measured 135.1 degrees Fahrenheit.

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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**Plan of Correction  
Greenfield Senior Living,  
Perkiomen Valley  
License#137350**

1. **Regulation 2600.89(b):** Hot water temperature in areas accessible to the resident may not exceed 120 degrees F.
2. **Citation:** On 6/8/17, at 10:20 am the water temperature at the faucet located in the bathroom measured 135 degrees F.
3. **Plan of Correction:**
  - The Maintenance Coordinator lowered the temperature on the boiler on June 7, 2017 and was able to bring the temperature down below 120 degrees by 3pm.
  - On the monthly maintenance safety check sheet the Maintenance Coordinator checks the water temperature in 6 different rooms. Effective immediately we will increase that to 8 per month. With 93 units in the building, this ensures all units are checked at least annually. The Maintenance Coordinator will be responsible to track which units are checked to ensure he is checking different units each month and will also make sure that each month there is a sampling from all areas/floors in the building.

Violation Report: 13735 - 06/07/2017 - Braswell, Natasha  
 PCH Name: GREENFIELD OF PERKIOMEN VALLEY

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  
 The home does not have procedures for the safe storage of the medical equipment. The resident's glucometer were stored in 6 inch plastic cups.

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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**Plan of Correction  
Greenfield Senior Living,  
Perkiomen Valley  
License#137350**

1. **Regulation2600.185(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.
2. **Citation:** The home does not have procedures for the safe storage of the medical equipment. The residents' glucometers were stored in 6-inch plastic cups.
3. **Plan of Correction:**
  - On 6/8/17 replacement glucometers were ordered for all residents that use glucometers and the glucometers were kept and stored in the zipper bag that they came in from the manufacturer.
  - On 6/9/17 a med tech/nursing meeting was held to inform every one of the need to store the glucometers in the black zipper bags.
  - During all med cart audits, med techs and nurses will examine glucometers to ensure proper storage in black zipper bags.