



pennsylvania
DEPARTMENT OF HUMAN SERVICES

DEC 15 2017

Dr. Scott Spreat, Ed.D,
President
Woods Services, Inc.
Attn: Dawn Shaffer
469 East Maple Avenue
Langhorne, Pennsylvania 19047

RE: Beechwood Center 1
585 Beechwood Circle
Langhorne, Pennsylvania 19047
License #: 126770

Dear Dr. Spreat:

As a result of the Department of Human Services' Personal Care Homes annual licensing inspections on October 11, 2017, October 12, 2017, and October 13, 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.

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: 12677 - 10/11/2017 - Kazimer, Lauren
 PCH Name: BEECHWOOD CENTER 1

1. REGULATION 55 Pa.Code §2800
 2600.85(a) - Sanitary conditions shall be maintained.

2a. DESCRIPTION OF VIOLATION

On 10/12, at approximately 12pm, there was a catheter bag with urine in it located in the shower stall floor of resident #1's bathroom.

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.

During inspection at Beechwood Center 1, there was an observation of a catheter bag with urine lying on the bathroom floor. At time of the observation staff removed the catheter bag from the floor. Staff inadvertently did not complete maintenance process of the catheter bag. To prevent this from occurring in the future all staff in the home has been instructed to maintain sanitary conditions at all times in the home to minimize the risk of resident illness, rodent and insect infestation and provides dignified living conditions for the residents. Specific procedures regarding proper handling and maintenance of residents catheter bags was reviewed with all staff. See attached training sheet. Housekeeper will check bathrooms daily to assure compliance.

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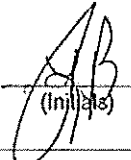
Signature of Legal Entity Representative
 (Required on EVERY Page) 

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Dawn Staffa Residential Director Date 11/4/17

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The above plan of correction is approved as of 10/28/17
 (Date)

Plan of correction implementation status as of 11/8/17
 (Date)

The above plan of correction was approved by 
 (Initials)

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

Violation Report: 12677 - 10/11/2017 - Kazimer, Lauren
 PCH Name: BEECHWOOD CENTER 1

1. REGULATION 55 Pa.Code §2600
 2600.101(j)(7) - Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on at bedside.

2a. DESCRIPTION OF VIOLATION
 Resident #1 does not have a source of light that can be turned on/off from bedside.

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.

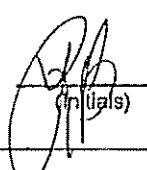
During inspection at Beechwood Center 1, it was observed Resident #1 did not have an operable lamp or other source of lighting that can be turned on at bedside. Resident #1 bed had been moved to opposite side of the bedroom at resident's request. A mounted wall lamp had been resident's source of light at bedside. Mistakenly staff didn't recognize resident no longer had the bedside source of light once bed was moved. Resident #1 now has a clip on light attached to the headboard of bed to insure resident has sufficient light to move safely around their room in the dark, reducing the risk of falls and injury. Administrator reviewed requirement of bedside lamp and its importance to Beechwood Center #1 staff. Administrator will do monthly checks to assure all lights are next to beds and operable.

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Dawn Shaffer Residential Director Date 11/4/17

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The above plan of correction is approved as of <u>10/28/17</u> (Date)	Plan of correction implementation status as of <u>11/8/17</u> (Date)
The above plan of correction was approved by  (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