



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail: [REDACTED]
MAILING DATE: April 13, 2018

Mr. Scott Spreat,
President
Woods Services, Inc.
Attn: **Dawn Schaffer**
469 East Maple Avenue
Langhorne, Pennsylvania 19047

RE: Beechwood Center 5
135 West Richardson Avenue
Langhorne, Pennsylvania 19047
License #: 129670

Dear Mr. Spreat:

As a result of the Department of Human Services' licensing inspection on March 27, 2018 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, appearing to read "Kenneth L. Wilson".

Kenneth L. Wilson
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report: 12967 - 03/27/2018 - Gray, Dean
 PCH Name: BEECHWOOD CENTER 5

1. REGULATION 55 Pa.Code §2600
 2600.141(b)(1) - A resident shall have a medical evaluation at least annually.

2a. DESCRIPTION OF VIOLATION
 Resident #1 last medical evaluation was completed on 03/09/17 which is more than 1 year prior to the date of inspection.

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 5 on 3/27/18, there was a review of resident #1's record. It was noted the last medical evaluation was completed on 03/09/2017 which is more than 1 year prior to the date of inspection. It is important to have updated accurate medical information to help the home to decide whether a resident's needs can be met at the home, helps the home develop accurate assessments, and support plans, and ensures the residents' medical need will be met. Resident #1 physical and completion of the DME was scheduled to occur on three separate occasions. The resident missed two scheduled appointments with the doctor due to inclement weather (nor east'r storms, state of emergency) on 3/8/18 and 3/15/18. The third scheduled appointment on 3/22/18 was missed due to a missed communication. Direct care staff was not aware of the appointment thus resident did not see the doctor. The medical evaluation for resident #1 was completed on 3/29/18.

A new system has been established to assure clear communications between the Health and Wellness department, Residential managers and direct care staff of when a resident's physical is scheduled and the date the current DME will expire. This system and DHS Regulation 2600.141(a-b2), A resident shall have a medical evaluation at least annually and its importance to our residents was reviewed with Residential Managers on 4/11/18. The Nursing Supervisor of the Health and Wellness will do periodic monthly reviews to assure all medical evaluations are done annually and communicate to Residential managers if an appointment was missed.

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 4/12/18
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>4/13/18</u> (Date)	Plan of correction implementation status as of <u>4/12/18</u> (Date)
The above plan of correction was approved by <u>K.W.</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