



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail [REDACTED]  
November 9, 2018

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**  
**November 9, 2018**

Ms. Tine Hanson-Turton  
President  
Woods Services, Inc.  
Attn: Dawn Shaffer  
469 East Maple Avenue  
Langhorne, Pennsylvania 19047

RE: Beechwood Center 2  
589 Beechwood Circle  
Langhorne, Pennsylvania 19047  
License #: 129640

Dear Ms. Hanson-Turton:

As a result of the Department's Bureau of Human Services Licensing inspection on July 19, 2018, August 29, 2018, September 10, 2018, September 14, 2018, and September 17, 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 that reads "Patricia Adams".

Patricia Adams  
Regional Licensing Director

Enclosure  
Licensing Inspection Summary



Violation Report: 12964 - 08/29/2018 - Gray, Dawn  
 PCH Name: BEECHWOOD CENTER 2

1. REGULATION 56 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

On 06/27/18 it was reported to the home that there had been multiple unauthorized transactions done on a resident #1's checking account by use of a newly issued debit card. The transactions took place in and around the Philadelphia area while resident #1 was in Texas with family. Resident #1 stated that the PIN number had been provided to Staff Member A previously. It was also stated that a new debit card had been ordered due to a separate suspicious transaction. An investigation had been initiated by the Middletown Township Police Department. The detective in charge of the investigation was able to gather physical evidence, including visual evidence, that showed staff member A using the resident's debit card to make unauthorized purchases. The unauthorized purchases totaled approximately \$5,000 to \$6,000.

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.

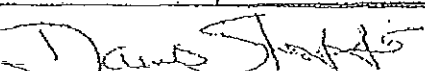
On 6/27/18, Resident #1's Mother reported that there had been multiple unauthorized transactions to Resident #1's checking account using a newly issued debit card. These transactions occurred in the Philadelphia area while Resident #1 was visiting family in Texas. Resident #1's Mother also initiated an investigation with Middletown Township Police Department.

This incident was potentially a violation of financial abuse towards Resident #1. Since allegations of financial abuse are taken seriously, Beechwood staff complied with and aided police investigation. Middletown Township Police Department requested that Staff A was not immediately suspended (as per Woods Investigation Procedure) as the Detective did not want to alert Staff A and risk losing element of surprise for external investigation. Due to concerns for safety of other residents, extra supervision was put in place until Staff A was suspended on 7/2/2018 pending internal investigation. Upon completion of the internal investigation, Staff A was terminated from her employment for violation of Woods' Abuse Policy on 8/6/2018.

To prevent such incidents from occurring in the future, Bucks County Ombudsman will review Resident Rights with emphasis on protecting Residents from Abuse, Neglect, Exploitation and Misappropriation of Property with staff of residence (target date for completion of training 10/12/18). Mail procedures have been revised; residential manager will distribute all incoming US mail directly to the resident. Our objective is with proper training and revised protocol; we will further protect Residents from abuse and neglect.

Residential Manager will be vigilant for any behavior by staff that would hint at financial abuse, exploitation and/or misappropriation of property of Residents. Furthermore, all staff will continue to participate in mandatory annual training which reviews Resident Rights, teaches staff the definitions of types of abuse, how to recognize abuse and how to report it to the appropriate person.

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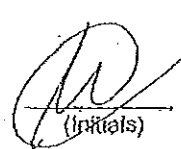
Signature of Legal Entity Representative (Required on EVERY Page) 

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Dawn Shaffer, Res. Director Date 10/12/18

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

The above plan of correction is approved as of 10/18/18 (Date)

Plan of correction implementation status as of \_\_\_\_\_ (Date)

The above plan of correction was approved by  (Initials)

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