



pennsylvania
DEPARTMENT OF HUMAN SERVICES

July 11, 2019

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's Bureau of Human Services Licensing annual inspection on April 11, 2019 of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) 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,

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

Jacqueline L. Rowe
Director

Enclosure
Violation Report

Violation Report

Facility Information

Name: RYDAL PARK PERSONAL CARE

License Number: 138120

Address: 1515 THE FAIRWAY, RYDAL, PA 19046

County: MONTGOMERY

Region: SOUTHEAST

Administrator

Name: Dania West

Phone: 2153766278

Email:

Legal Entity

Name: PHILADELPHIA PRESBYTERY HOMES INC

Address: 2000 JOSHUA ROAD, PA, 19444

Certificate(s) of Occupancy

Type: C-2 LP

Date: 09/11/2012

Issued By: Abington TWP

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 74

Waking Staff: 56

Inspection

Type: Full

BHA Docket #:

Notice: Unannounced

Reason: Renewal

Inspection Dates and Department Representative

04/11/2019 - On-Site: Michele Swisher, Denise Gillespie

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 72

Residents Served: 54

Secured Dementia Care Unit

In Home: Yes

Area: 4th Floor

Capacity: ~~22~~ 23

Residents Served: 22

Hospice

Current Residents: NM

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: ~~55~~ 54

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 20

Have Physical Disability: 0

183e - Storing Medications

Regulations

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

Description of Violation

On 4/11/19 a total of 8 pills were found loose in the 3rd floor medication cart.

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 4/11/2019 a total of 8 pills were found loose in the 3rd floor medication cart. Medication cart was immediately audited by Nurse Manager. Please see attachment 1, 2 & 3. Going forward the account manager from the pharmacy has informed me that no excess PRN medication will be sent. Please see attachment 3. Also Administrator or Nurse Manager will ensure that medication cart are audited and that no loose pills are in the cart. The home quality management program will include a continuing review to ensure compliance of this regulation. Please see attached....

Legal Entity Representative
Dania West

Signature DWest, Dania West, Personal Care Administrator
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX

Date 6/18/19

The above plan of correction is approved as of (Date)

06-21-19 (Date)

Plan of correction implementation status as of (Date)

06-21-19 (Date)

The above plan of correction was approved by (Initials)

SP (Initials)

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

2600.183 e

A designated staff person qualified to administer medications will check the medication cart at least daily to ensure all medications are properly packaged and stored including that there are no unpackaged or loose medications in the medication cart. Documentation of checks will be kept. Home did send in medication cart checks / logs and proof staff was in serviced on 04-11-19. SP 06-21-19

Jun 17, 2019 3:34PM

No. 7296 P. 6

RYDAL PARK PERSONAL CARE

138120

185a - Implement Storage Procedures

Regulations

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.

Description of Violation

Resident #1's glucometer is not calibrated to the correct date and time. On 4/11/19 at 3:15P the glucometer for Resident #1 was set to 3/14/19 at 11:28AM.

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.)

Resident #1's glucometer is not calibrated to the correct date and time. On 4/11/2019 at 3:15pm the glucometer for Resident #1's was set to 3/14/19 at 11:28AM. Resident #1 glucometer was calibrated and set to correct date and time. Nurses was also immediately inserviced to this regulation - Please see attachment 4. Monthly audit will be done. ^{5.} Going forward Administrator or nurse manager will ensure that all glucometer are being calibrated monthly. The Home quality management program will include a ~~contouring~~ review to ensure compliance of this regulation. Legal Entity Representative

Please see attached....

Signature DWest. Dania West
Printed Name and Title Personal Care Administrator date 6/18/2019.
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The above plan of correction is approved as of 06-21-19 (Date)
Plan of correction implementation status as of 06-21-19 (Date)
The above plan of correction was approved by SP (Initials)
 Fully Implemented
 Partially Implemented - Adequate Progress
 Partially Implemented - Inadequate Progress
 Not Implemented

2600.185 a

The administrator or designee will audit all resident glucometers to ensure they are calibrated to the correct date and time. Home did send in verification staff was in-serviced on accu-checks and glucometer calibration on 04-11-19. SP 06-21-19