



July 5, 2019

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

RE: Beechwood Center 3
587 Beechwood Circle
Langhorne, Pennsylvania 19047
License #: 129650

Dear Ms. Hansen-Turton:

As a result of the Department's Bureau of Human Services Licensing annual inspection on May 1, 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". The signature is written in a cursive, flowing style.

Jacqueline L. Rowe
Director

Enclosure
Violation Report

Violation Report

Facility Information

Name: *BEECHWOOD CENTER 3*

License Number: *129650*

Address: *587 BEECHWOOD CIRCLE, LANGHORNE, PA 19047*

County: *BUCKS*

Region: *SOUTHEAST*

Administrator

Name: *June Baranick*

Phone: *2157504001*

Email: *TINE@WOODS.ORG*

Legal Entity

Name: *WOODS SERVICES INC ATTN DAWN SHAFFER*

Address: *469 E. MAPLE AVE., PA, 19047*

Certificate(s) of Occupancy

Type: *C-1*

Date: *09/07/1984*

Issued By: *Commonwealth of PA*

Staffing Hours

Resident Support Staff: *0*

Total Daily Staff: *7*

Waking Staff: *5*

Inspection

Type: *Full*

BHA Docket #:

Notice: *Unannounced*

Reason: *Renewal*

Inspection Dates and Department Representative

05/01/2019 - On-Site: Jennie Heinberg, David Carrion

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *8*

Residents Served: *7*

Secured Dementia Care Unit

In Home: *No*

Area:

Capacity:

Residents Served:

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *2*

Are 60 Years of Age or Older: *1*

Diagnosed with Mental Illness: *0*

Diagnosed with Intellectual Disability: *0*

Have Mobility Need: *0*

Have Physical Disability: *1*

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

On 5/1/2019, the home's policy and procedures for refilling and storing residents medication was not available to the Department's licensing representatives at the time of inspection.

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 of Beechwood Center 3 on 5/1/2019, it was noted that the home's policy and procedures for refilling and storing medications was not available to the Department's licensing representatives. It is important to have policies and procedures more readily accessible to all staff and interested agencies to ensure a source of reference when warranted by situations to ensure all resident's medication needs will be met.

The existing policy, 6.3 Nursing Services: Medication Administration has been attached. This policy is reviewed periodically and is accessible to all staff on the shared drive.

Please see attached.....

Legal Entity Representative


Signature Jennifer Caputo BSN, RN, CBIS

Director of Health + Wellness
Printed Name and Title Jennifer Caputo BSN, RN, CBIS 5/28/19
Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 06-17-19
(Date)

Plan of correction implementation status as of 06-17-19
(Date)

The above plan of correction was approved by SP
(Initials)

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

05/01/2019

2 of 2

2600.185(a)

Administrator or designee will ensure the home has developed and implemented procedures for safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons. Policies and procedures to be accessible to representatives of the Department at all times. Staff that handle medications and medical equipment will be trained and familiar with policies and procedures. SP 06-17-19