



July 5, 2019

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

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

Dear Ms. Hansen-Turton:

As a result of the Department's Bureau of Human Services Licensing annual inspection on May 2, 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 stylized and cursive.

Jacqueline L. Rowe
Director

Enclosure
Violation Report

132f - Alternate Exit Routes

Regulations

2600.

132.f. Alternate exit routes shall be used during fire drills.

Description of Violation

The front door was the only exit route used during the fire drills held from Nov 2018 to Feb 2019.

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 annual inspection at Beechwood Center 5 on 4/25/2019 it was observed that the fire drills recorded from November 2018 to February 2019 utilized the same exit point which violated regulation 132f. This regulation is important because it encourages homes to vary the location of the fire and exit routes used during fire drills. This ensures that the staff and residents of the home are familiar with all exits of the home. The 132f regulation was violated due to the fact that there was not a spreadsheet or fire drill record in place in the home to reference before holding a fire drill. This contributed to the fire drill exit route remaining the same over a period of months.

In order to remedy the violation, a spreadsheet has been created to track location of fires and exits used each month. It will be updated monthly by the supervisor/manager who completes the fire drill in the home. Before a fire drill is completed, supervisor/manager will consult the spreadsheet to ensure an alternate exit and fire location are used from the previous month. The fire drill record will be reviewed by manager and director each month to verify alternate exit routes are used.

Please see attached..

Legal Entity Representative


Signature

DAVID SHAFER Res. Director 5/29/19
Printed Name and Title 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

2600.132 (f)

Administrator of designee will ensure alternate routes are being utilized during monthly fire drills. The same exit will not be used every month. Home did provide updated fire drill record logs to keep track of alternating exits. Home will maintain fire drill logs for Department review. SP 06-17-19

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 05/01/19, the home's policy and procedures for refilling and storing medications 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 5 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

Jennifer Caputo
Signature

Director of Health +wellness
Jennifer Caputo BSN, RN, CBIS
Printed Name and Title

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

05/02/2019

3 of 3

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