



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail thansen-turton@woods.org
Sent via e-mail dshaffer@woods.org
April 6, 2020

Ms. Tine Hansen-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. Hansen-Turton:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on October 23, 2019 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

Mia Johnson

Mia Johnson
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: *BEECHWOOD CENTER 2*

License Number: *12964*

Address: *589 BEECHWOOD CIRCLE,, LANGHORNE, PA 19047*

County: *BUCKS*

Region: *SOUTHEAST*

Administrator

Name: *Katelyn Fiore*

Phone: *2157504001*

Email: *TINE@WOODS.ORG*

Legal Entity

Name: *WOODS SERVICES, INC.*

Address: *469 E. MAPLE AVE., ATTN DAWN SHAFFER, LANGHORNE, PA, 19047*

Certificate(s) of Occupancy

Type: *C-3 SP*

Date:

Issued By:

Staffing Hours

Resident Support Staff: *0*

Total Daily Staff: *7*

Waking Staff: *5*

Inspection

Type: *Partial*

BHA Docket #:

Notice: *Unannounced*

Reason: *Incident*

Inspection Dates and Department Representative

10/23/2019 - On-Site: 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: *0*

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: *0*

42c - Treatment of Residents

Regulations

2600.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

On 06/18/19, resident #1 asked for staff person A to open his cake. Staff person A, stated wait until after dinner to have your cake. Resident #1 became angry and started yelling and calling staff person A racial slurs. Staff person tried to take the cake out of residents hand. The cake was smashed and resident was not able to eat it. The cake was thrown in the trash.

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.)

Regulation 2600.42c a resident s hall be treated with dignity and respect. This regulation is important to ensure that all residents are treated in a respectful and dignified manner. On 6/19/2019 at 11am Beechwood Resident 1 reported that he and staff member A were involved in a verbal altercation on 6/18/2019 around 6:30pm. Resident stated that he asked staff A for help with his shower and she refused to assist him. Resident 1 said he responded by calling her racial slurs. Resident 1 said that the staff A continued to ignore his request for help. He stated that a short time later as he was in his room staff A entered his bedroom and threw a cup of water in his direction. Resident 1 stated the water landed on his bed/comforter. Resident 1 also stated that he asked staff for assistance to open a package of food for him and she refused and instead took the package from him and crushed it. Resident 1 stated this made him upset and he used racial slurs directed at staff A and went to his bedroom. Resident 1 also reported that later in the night staff A opened his room door and threw what looked like crumbled bread on his bed while he was laying in it. There were no injuries to resident 1 reported. Adult Protective Services were notified of the allegation and the staff A was immediately suspended pending the outcome of an investigation. Safety plan: Staff 1 would not have any contact with residents during the investigation process. Based upon certified investigator's investigation the statements collected from staff and review of photo evidence collected the allegation of abuse/neglect is not supported and is determined to be unconfirmed. Final reports were reported to DHS/Liberty Health. Staff A remained suspended until DHS reviewed the incident. *See attached page 2

Legal Entity Representative



Signature

Davis Shaffer, Res. Director 11/17/19
Printed Name and Title Date

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The above plan of correction is approved as of 4/6/20 Plan of correction implementation status as of 4/6/20
(Date) (Date)

Fully Implemented

The above plan of correction was approved by 
(Initials)

Not Implemented

On 10/23/19 DHS inspector came to Beechwood Center 2 to review the reported incident. The violation of "A resident shall be treated with dignity and respect" was issued. The cause of the violation was a resident had asked staff person A to open his cake. Staff person A stated wait until after dinner to have your cake. Resident became angry and started yelling and calling staff person A Racial Slurs. Staff person A tried to take the cake out of the residents had. The cake was smashed and resident was not able to eat it. The cake was thrown in the trash. To prevent such incidents from occurring in the future Bucks County Ombudsman, Debra Taylor will conduct an in-service for all staff of Beechwood Center 2, 589 Beechwood on 11/21/19 @ 2:30pm on the topic of Dignity and Respect. Documentation of completion will be sent to DHS. To further prevent any such incidents from occurring in the future, the residential manager will be vigilant for any behavior by staff that would even hint at a lack of dignity, courtesy, or respect. Residential manager will provide ongoing monitoring of the treatment of the residents by staff members across all shifts. The manager will monitor and council staff if anything less than appropriate, dignified, courteous, and respectful. In addition, all staff participate in regular and periodic bi-annual training to review Resident Rights, and the "SMART" approach to crisis intervention (training logs are maintained by the home for Department review). Residential Manger will provide ongoing support with staff by reviewing any difficult situation that staff may have when interacting with specific residents on an as needed basis.

Dawn Shaffer
Residential Director
D. Shaffer 11/17/19

65f - Training Topics

Regulations

2600.

65.f. Training topics for the annual training for direct care staff persons shall include the following:

1. Medication self-administration training.
2. Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
3. Care for residents with dementia and cognitive impairments.
4. Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
5. Personal care service needs of the resident.
6. Safe management techniques.
7. Care for residents with mental illness or an intellectual disability, or both, if the population is served in the home.

Description of Violation

Direct care staff person B did not receive training in care for residents with dementia and cognitive impairments during training year 2018.

Plan of Correction (POC)

This regulation is important to ensure that staff persons receive the necessary training to successfully provide essential resident care services. This violation was violated due to Staff member B training record listed "Brain Injury" as the topic covered. It did not accurately reflect that the staff received training in "Care for resident with dementia and cognitive impairments. Further cause of the violation was due to the training material that was used to be in compliance with regulation 2600.65f was not available at the inspection on 10/23/19, thus not able to verify the topic was covered. To prevent this from occurring in the future the training documentation form will clearly list program objectives as well as the Program title. When training on a subtopic, this will be indicating which of the topics listed in 2600.65f the training relates. Residential manager will provide ongoing scheduling, monitoring and verifying all direct care staff in the home receive all required training through accurate documentation and maintenance of Training plan record. Attached is training materials covered in the 2018 all shift annual training for Staff B. * Power point and notes are attached depicting the topic of dementia and cognitive impairments was covered. (see notes for slides # 27, #28 & #29)

1 steps to

Legal Entity Representative


Signature

 11/17/19
Printed Name and Title Date

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