



Sent via e-mail [thansen-turton@woods.org](mailto:thansen-turton@woods.org)  
Sent via e-mail [dshaffer@woods.org](mailto:dshaffer@woods.org)  
March 30, 2020

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

RE: Beechwood Center 6  
166 Brendwood Drive  
Langhorne, Pennsylvania 19047  
License #: 129680

Dear Ms. Hansen-Turton:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on February 19, 20, and 21, 2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

*Shawn Parker*

Shawn Parker  
Human Services Licensing Supervisor

Enclosure  
Licensing Inspection Summary

# Violation Report

## Facility Information

Name: BEECHWOOD CENTER 6

License Number: 12968

Address: 166 BRENDWOOD DRIVE,, LANGHORNE, PA 19047

County: BUCKS

Region: SOUTHEAST

## Administrator

Name: Scott Cowen

Phone: 2157504001

Email: scowen@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: 05/17/1995

Issued By: COPA L&I

## Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 5

Waking Staff: 4

## Inspection

Type: Full

BHA Docket #:

Notice: Unannounced

Reason: Renewal

## Inspection Dates and Department Representative

02/19/2020 - On-Site: Michele Swisher, Youn Chung

02/20/2020 - On-Site: Michele Swisher, Youn Chung

02/21/2020 - On-Site: Michele Swisher, Youn Chung

## Resident Demographic Data as of Inspection Dates

### General Information

License Capacity: 5

Residents Served: 5

### 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

141a - Medical Evaluation

Regulations

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission.

Description of Violation

The initial medical evaluation for resident #1 was not complete within 60 days prior to admission or within 30 days after admission of the resident.

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 6, there was a review of resident #1's record. It was noted that the medical evaluation was not completed for the resident's admission to the home. It is important that the medical evaluation documentation be completed within 60 days prior to admission or within 30 days after admission to ensure assessment and proper care of the resident.

A new system has since been implemented as of March 1<sup>st</sup>, 2020 and will help ensure this error from happening in the future by streamlining the workflow through one central person to verify all documents are completed in their entirety avoiding the opportunity for paper documents to be misplaced and/or remain unsigned or incomplete. The Director of Health & Wellness will follow up monthly to ensure the workflow is successful.

Legal Entity Representative

*Jennifer Caputo*  
Signature

Jennifer Caputo - Director of Health & Wellness 3/10/20  
Printed Name and Title Date

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The above plan of correction is approved as of 03-29-2020 (Date) Plan of correction implementation status as of 03-29-2020 (Date)

The above plan of correction was approved by SP (Initials)  Implemented  Not Implemented

141a 1-10 Medical Evaluation Information

Regulations

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:

1. A general physical examination by a physician, physician's assistant or nurse practitioner.
2. Medical diagnosis including physical or mental disabilities of the resident, if any.
3. Medical information pertinent to diagnosis and treatment in case of an emergency.
4. Special health or dietary needs of the resident.
5. Allergies.
6. Immunization history
7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
8. Body positioning and movement stimulation for residents, if appropriate.
9. Health status.
10. Mobility assessment, updated annually or at the Department's request.

Description of Violation

Resident #1's medical evaluation dated 9/18/19 did not include medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.

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 6, there was a review of resident #1's record. It was noted that the medical evaluation completed 9/18/19 did not include medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications. It is important to include all required information in the medical evaluation documentation within 60 days prior to admission or within 30 days after admission to ensure proper care of the resident.

A new system has since been implemented as of March 1<sup>st</sup>, 2020 and will help ensure this error from happening in the future by streamlining the workflow through one central person to verify all documents are completed in their entirety avoiding the opportunity for paper documents to be misplaced and/or remain unsigned or incomplete. The Director of Health & Wellness will follow up monthly to ensure the workflow is successful.

Legal Entity Representative

 \_\_\_\_\_ Jennifer Caputo - Director of Health+Wellness 3/10/20  
 Signature Printed Name and Title Date

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 (Date) (Date)

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 (Initials)

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

The homes policy for storing opened eye drops is to write the date that the eye drops were initially opened and then to discard any unused medication after 30 days.

A bottle of Artificial Tears belonging to resident #1 and a bottle of Artificial tears belonging to resident #2 were present in the medication cart. There are no opened on dates written on the medication bottles.

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 6, it was noted that two Resident's bottles of artificial tears did not include open dates. It is important that all medications be stored and disposed of properly. In order to ensure this, an open date must be written whenever a new medication is opened to alert others to dispose of any unused medication if it is past the appropriate time frame as per manufacturer's instruction.

Monthly medication checks in medication carts shall be implemented. These checks will include verification of physician's orders and indication/diagnosis for each prescribed medication, disposal of expired medications, labeling of open date for medications including insulins and OTC medications, narcotic count checks, glucometer calibration, and medication availability. The staff member responsible for the monthly check will be required to sign a monthly log to ensure that the checks have been completed. The Director of Health & Wellness will provide monthly check off sheets and follow up accordingly to ensure their usage. These inspection sheets will begin March 2020.

Legal Entity Representative

*Jennifer Caputo*  
Signature

Jennifer Caputo - Director of Health + Wellness 3/10/20  
Printed Name and Title Date

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187b - Date/Time of Medication Admin.

Regulations

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

Resident #1 is prescribed Lorazepam 0.5mg take 1 tablet by mouth twice at day at 8:00 am and 8:00 pm. This medication was not administered to resident #1 on 2/13/2020 at 8:00 am however the medication administration record is initialed as administered. The medication is still present in the medication blister package.

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 6, it was noted that Resident #1's Lorazepam was not administered as ordered on 2/13/20. It is important that all medications administrations be properly documented to verify that they were completed as ordered.

Monthly medication checks in medication carts shall be implemented. These checks will include verification of physician's orders and indication/diagnosis for each prescribed medication, disposal of expired medications, MAR's reviewed, labeling of open date for medications including insulins and OTC medications, narcotic count checks, glucometer calibration, and medication availability. The staff member responsible for the monthly check will be required to sign a monthly log to ensure that the checks have been completed. The Director of Health & Wellness will provide monthly check off sheets and follow up accordingly to ensure their usage. These inspection sheets will begin March 2020. There will also be additional training provided to nurses and MTS that administer in the homes.

Legal Entity Representative

*Jennifer Caputo*  
Signature

Jennifer Caputo - Director of Health & Wellness 3/11/20  
Printed Name and Title Date

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187d - Follow Prescriber's Orders

Regulations

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #1 is prescribed Lorazepam 0.5mg- take 1 tablet by mouth twice a day at 8:00 am and 8:00 pm. . However, this medication was not administered to resident #1 on 2/13/20 at 8:00 am.

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 6, it was noted that Resident #1's Lorazepam was documented on the MAR as administered, however the medication was present in the card still. It is important that all medications administrations be properly administered as per physicians orders and documented to verify that they were completed as ordered.

Monthly medication checks in medication carts shall be implemented. These checks will include verification of physician's orders and indication/diagnosis for each prescribed medication, disposal of expired medications, MAR's reviewed, labeling of open date for medications including insulins and OTC medications, narcotic count checks, glucometer calibration, and medication availability. The staff member responsible for the monthly check will be required to sign a monthly log to ensure that the checks have been completed. The Director of Health & Wellness will provide monthly check off sheets and follow up accordingly to ensure their usage. These inspection sheets will begin March 2020. There will also be additional training provided to nurses and MTS that administer in the homes.

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