

Department of Human Services
Bureau of Human Service Licensing

November 30, 2020

BILL SNOW , CONTACT PERSON
RAPPS SENIOR CARE LLC
1000 LEGION PLACE, SUITE 1600
ATTN BILL SNOW
ORLANDO, FL 32801

RE: WOODBRIDGE PLACE
1191 RAPPS DAM ROAD
PHOENIXVILLE, PA, 19460
LICENSE/COC#: 14359

Dear Mr. SNOW ,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/16/2020, 09/28/2020, 10/14/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Mia Johnson

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC**

Facility Information

Name: *WOODBIDGE PLACE* License #: *14359* License Expiration Date: *11/19/2021*
Address: *1191 RAPPS DAM ROAD, PHOENIXVILLE, PA 19460*
County: *CHESTER* Region: *SOUTHEAST*

Administrator

Name: *DEB BODNAR* Phone: *610-933-7000* Email:
executivedirector@woodbridgeplace.com,

Legal Entity

Name: *RAPPS SENIOR CARE LLC*
Address: *1000 LEGION PLACE, SUITE 1600, ATTN BILL SNOW, ORLANDO, FL, 32801*
Phone: *4843020005* Email: *ROBB.CHAPIN@BRIDGEIG.COM*

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *07/01/1995* Issued By: *COMMONWEALTH OF PENNSYLVANIA*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *98* Waking Staff: *74*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint* Exit Conference Date: *09/28/2020*

Inspection Dates and Department Representative

09/16/2020 - On-Site: Natasha Braswell
09/28/2020 - On-Site: Natasha Braswell
10/14/2020 - Off-Site: Natasha Braswell

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *125* Residents Served: *68*

Secured Dementia Care Unit

In Home: *Yes* Area: *MEMORY CARE* Capacity: *25* Residents Served: *17*

Hospice

Current Residents: *5*

Resident Demographic Data as of Inspection Dates (*continued*)

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 68

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 30

Have Physical Disability: 0

Inspections / Reviews

09/16/2020 - Partial

Lead Inspector: *Natasha Braswell*Follow-Up Type: *POC Submission*Follow-Up Date: *11/06/2020*

11/5/2020 - POC Submission

Lead Reviewer: *Mia Johnson*Follow-Up Type: *Document Submission*Follow-Up Date: *11/09/2020*

11/30/2020 - Document Submission

Lead Reviewer: *Mia Johnson*Follow-Up Type: *Not Required*

181c - Self-administration Assessment

1. Requirements

2600.

181.c. The resident's assessment shall identify if the resident is able to self-administer medications as specified in § 2600.227(e) (relating to development of the support plan). A resident who desires to self-administer medications shall be assessed by a physician, physician's assistant or certified registered nurse practitioner regarding the ability to self-administer and the need for medication reminders.

Description of Violation

Resident #1 self-administers medications to include Dorzol/Timol Sol 22.3-6.8, Erythromycin OIN and Latanoprost SOL 0.005%; however, resident #1 has not been assessed by a physician, physician's assistant or certified registered nurse practitioner regarding ability to self-administer and the need for reminders to take medications.

Plan of Correction**Accept**

PLAN OF CORRECTION – 2600.181c

Nursing staff completed a self-medication test for Resident #1 and observed her installing her own eyedrops.

(ATTACHMENT 1) Resident #1 was found to be capable to install her own eye drops, follow prescribed directions, time, route and has the manual dexterity to open and remove the medication from the packaging. Resident #1 can follow all directions as prescribed and can store medication in a locked cabinet as needed. Support Plan has been updated. (ATTACHMENT 2)

Each chart for residents who self-medicate have been reviewed to ensure that they have a current self-medication assessment form. Medication assessment forms will be updated annually or at change of condition. All residents who self-medicate were found to have current assessment forms in their clinical record.

All nursing staff was in-serviced on the Woodbridge Place self-administration policy and the need to preform self-administration assessments on new residents upon admission and annually. (ATTACHMENT 3) A tickler file has been initiated in-order to serve as a reminder for annual assessments. (ATTACHMENT 4) When the annual assessment is due (change of condition), nursing staff will place the assessment form in the Physicians communication book along with the DME. Once these forms are completed and signed by physician, physician assistant, or certified registered nurse practitioner, nursing staff will place self-administration assessment with completed DME and place in resident's clinical record.

Using the Tickler File, nursing staff will audit each residents' clinical record who self-administers, to ensure annual assessments (change of condition) are completed timely. Outcomes of this audit will be discussed in the next Quality Assurance meeting scheduled for November 12th, 2020.

Completion Date: 11/04/2020

Document Submission**Implemented**

Updated DME for Resident 1 submitted 11-18-2020

181d -Storing Medication

1. Requirements

2600.

181d -Storing Medication (continued)

181.d. If the resident does not need assistance with medication, medication may be stored in a resident's room for self-administration. Medications stored in the resident's room shall be kept locked in a safe and secure location to protect against contamination, spillage and theft.

Description of Violation

Resident #1 self-administers medications and stores medications in her room. On 9/28/20, at 11:00 am, there were several unlocked, unattended medications to include Dorzoli/Timol Sol 22.3-6.8, Erythromycin OIN, Latanoprost Sol 0.005%, in resident #1's bedroom.

Plan of Correction**Accept****PLAN OF CORRECTION 2600.181D**

Resident #1's room was immediately searched for unlocked and unattended medication. All medication was locked and put away in a safe location for protection by nursing staff. Nursing staff provided verbal instructions to Resident #1 on safety and how to protect against contamination, spillage, and theft of medications. Resident #1 verbalized understanding. Nursing staff will observe resident #1's room upon entering to ensure medication is being properly stored in the designated locked and secured location.

The rooms of each resident who self-administers medication have been checked to ensure proper storage. Rooms of residents that self-medicate will be checked each time nursing staff enters the room to ensure that medication is stored properly.

If at any point medication is not stored properly, the resident will be educated on how to safely store their medications. If a self-medicating resident should have a change of condition, a new assessment form and DME will be completed. The resident support plan will be updated accordingly. All nursing staff have been in-serviced on storage of medication for residents who self-administer. (ATTACHMENT 1)

Nursing staff will continue to observe a residents' ability to follow the policy and procedure. Any issues identified will be corrected immediately. Outcomes will be discussed at the next Quality Assurance Meeting scheduled for November 12th, 2020.

Completion Date: 11/04/2020

Document Submission**Implemented**

Resident 1 continues to administer her medication as per her preference and Self-Medication Administration Assessment outcome. Her room will be checked daily during medication passes by the Nursing staff to ensure that all her medications are properly stored in her drawer and the drawer is locked. Nursing staff has been inserviced on this procedure. Thus far, Resident 1 has been compliant and no issues have been identified.