

Department of Human Services
Bureau of Human Service Licensing

December 18, 2020

[REDACTED], DIRECTOR OF ACCREDITATION, LICENSING, AND PROGRAM DEVELOPMENT
WOODS SERVICES, INC.
469 E. MAPLE AVE.
ATTN DAWN SHAFFER
LANGHORNE, PA 19047

RE: BEECHWOOD CENTER 4
586 BEECHWOOD CIRCLE
LANGHORNE, PA, 19047
LICENSE/COC#: 12966

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 11/09/2020 of the above facility, the citations specified on the enclosed Licensing Inspection Summary (LIS) were found.

We have determined that your plan of correction is: Acceptable

All citations specified on the plan of correction must be corrected by the dates specified on the License Inspection Summary (violation report) and continued compliance with Department statutes and regulations must be maintained.

Sincerely,
Claire Mendez

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: *BEECHWOOD CENTER 4* License #: *12966* License Expiration Date: *11/01/2021*
Address: *586 BEECHWOOD CIRCLE, LANGHORNE, PA 19047*
County: *BUCKS* Region: *SOUTHEAST*

Administrator

Name: [REDACTED] Phone: *2157504001* Email: [REDACTED]

Legal Entity

Name: *WOODS SERVICES, INC.*
Address: *469 E. MAPLE AVE., ATTN DAWN SHAFFER, LANGHORNE, PA, 19047*
Phone: *2157504001* Email: [REDACTED]

Certificate(s) of Occupancy

Type: *Other* Date: *08/29/1984* Issued By: *Township of Middletown*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *8* Waking Staff: *6*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Monitoring* Exit Conference Date: *11/13/2020*

Inspection Dates and Department Representative

11/09/2020 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *8* Residents Served: *8*

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: *2*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *0* Have Physical Disability: *2*

Inspections / Reviews

11/09/2020 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *12/13/2020*

Inspections / Reviews (*continued*)

12/11/2020 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *12/13/2020*

12/18/2020 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *12/31/2020*

1/28/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

85a - Sanitary Conditions

1. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

On 11/9/2020 at 12:45P.M., the shared bathroom of Resident # 1 had a very strong odor of urine.

Plan of Correction

Do Not Accept

During an inspection of Beechwood Center 4 on 11/9/2020, inspectors observed there was a strong odor of urine in shared bathroom for Resident #1. Concerns were reviewed with the housekeeper and employee was reminded of the importance maintaining sanitary conditions daily. The bathroom was thoroughly cleaned by housekeeping following the inspection. Housekeeping is expected to clean bathrooms daily in order to ensure sanitary conditions are maintained. To further monitor bathroom sanitation, it will be included in environmental reviews by management.

Completion Date: 11/09/2020

Update - 12/11/2020

Please indicate how often environmental reviews will be completed and how this will be tracked/monitored for department review.

Plan of Correction

Accept

During an inspection of Beechwood Center 4 on 11/9/2020, inspectors observed there was a strong odor of urine in shared bathroom for Resident #1. Concerns were reviewed with the housekeeper and employee was reminded of the importance maintaining sanitary conditions daily. The bathroom was thoroughly cleaned by housekeeping following the inspection. Housekeeping is expected to clean bathrooms daily in order to ensure sanitary conditions are maintained. To further monitor bathroom sanitation, management will monitor monthly environmental review checklist which will be made available for departmental review. environmental reviews by management.

Completion Date: 11/09/2020

Document Submission

Implemented

Attached documentation of review with housekeeper and December environmental review.

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 # 2 self-administers medications to include [REDACTED] however, Resident #2 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.

181c - Self-administration Assessment (continued)

Plan of Correction

Do Not Accept

During an inspection of Beechwood Center 4 on 11/9/20, it was noted that a resident had ██████████ in the bedroom. The resident did not have the documentation to support the ability to self-administer the medication. Individual will be re-evaluated by the Physician and an order will be received to store in the bedroom and self-administer when deemed competent to do so. Additionally the DME will be updated to reflect these changes. If deemed unable to self-administer, the medication will be stored in the locked medication cart.

Completion Date: 11/20/2020

Update - 12/11/2020

Please indicate immediate resolution to resolve the violation in the interim, and other steps the home is taking to ensure all residents' rooms are audited for similar issues.

Plan of Correction

Accept

During an inspection of Beechwood Center 4 on 11/9/20, it was noted that a resident had ██████████ in the bedroom. The resident did not have the documentation to support the ability to self-administer the medication. The ██████████ was immediately locked in the medication cart and the individual will be re-evaluated by the Physician. An order will be received to store in the bedroom and self-administer when deemed competent to do so. Additionally the DME will be updated to reflect these changes. If deemed unable to self-administer, the medication will be stored in the locked medication cart. Management completes monthly environmental reviews of the homes and will immediately report any medications located in each resident's room to confirm the ability to self-administer with documentation.

Completion Date: 11/20/2020

Document Submission

Implemented

Physician did not deem individual competent to self administer. No changes to the DME. Attached med cart audit and environmental review.

185a - Implement Storage Procedures

1. Requirements

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 11/9/2020 at 12:51 P.M. Resident # 3's ██████████ read ██████████ 12:51 A.M.

Plan of Correction

Accept

During an inspection of Beechwood Center 4 on 11/9/2020 it was noted that a resident's ██████████ was indicated as AM when it should have been PM. Procedures for verifying dates and time on a ██████████ were reviewed with nursing staff. Additionally, nursing staff will complete a monthly review of ██████████ to ensure that they are accurately calibrated to the correct date and time. This review will be included in the monthly med cart checklist, signed off by reviewer and submitted to the Director of Health and Wellness by the 15th of each month.

Completion Date: 11/20/2020

Document Submission

Implemented

██████████ was calibrated to correct date and time (photo attached). Med cart review checking the ██████████ is attached.