

Department of Human Services
Bureau of Human Service Licensing

August 12, 2021

[REDACTED], OWNER
[REDACTED]
[REDACTED]

RE: WYNWOOD HOUSE AT PENNS
VALLEY
122 WYNWOOD DRIVE
CENTRE HALL, PA, 16828
LICENSE/COC#: 22997

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/11/2021, 05/12/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

[REDACTED]
Human Services Licensing Supervisor

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: WYNWOOD HOUSE AT PENNS VALLEY License #: 22997 License Expiration Date: 06/14/2021
Address: 122 WYNWOOD DRIVE, CENTRE HALL, PA 16828
County: CENTRE Region: NORTHEAST

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

[REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 04/20/2005 Issued By: PA L&I
Type: C-2 LP Date: 03/01/2001 Issued By: PA L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 38 Waking Staff: 29

Inspection

Type: Full Notice: Unannounced BHA Docket #:
Reason: Renewal, Incident Exit Conference Date: 05/12/2021

Inspection Dates and Department Representative

05/11/2021 - On-Site: [REDACTED]
05/12/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 40 Residents Served: 37

Secured Dementia Care Unit

In Home: No	Area:	Capacity:	Residents Served:
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Hospice

Current Residents: 3

Number of Residents Who:

Receive Supplemental Security Income: 0	Are 60 Years of Age or Older: 37
Diagnosed with Mental Illness: 0	Diagnosed with Intellectual Disability: 0
Have Mobility Need: 1	Have Physical Disability: 0

Inspections / Reviews

05/11/2021 - Full

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*

Follow-Up Date: *06/25/2021*

7/21/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *07/31/2021*

8/12/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

18 - Compliance With Laws

1. Requirements

2600.

- 18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

The home's CO2 detector located in the home's utility room which contains the home's gas fired hot water heaters. were not placed 15 feet away from the appliances as required for accurate monitoring. The monitor was placed 5 feet away.

Plan of Correction

Accept

The CO2 detector was immediately placed 15 feet away from appliance while surveyor still on site. CO2 placement checks added to Maintenance monthly checks. Please refer to attachment titled PV-CO2 placement.

This POC is completed.

Completion Date: 06/18/2021

Update - 07/21/2021

Document Submission

Implemented

The CO2 detector was immediately placed 15 feet away from appliance while surveyor still on site. CO2 placement checks added to Maintenance monthly checks. Please refer to attachment titled PV-CO2 placement.

This POC is completed.

Completion Date: 06/18/2021

91 - Telephone Numbers

1. Requirements

2600.

- 91. Emergency Telephone Numbers - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

Description of Violation

Resident Room #30 did not have the following required emergency phone numbers posted near or by the resident's land line phone as required.

Plan of Correction

Accept

The required emergency phone numbers were immediately posted in rm# 30 near the resident's phone. Monthly room checks on phone numbers will be implemented and overseen by administrator. Please refer to attachment titled PV-Phone numbers.

This POC is complete.

Completion Date: 06/18/2021

Update - 07/21/2021

91 - Telephone Numbers *(continued)***Document Submission****Implemented**

The required emergency phone numbers were immediately posted in rm# 30 near the resident's phone. Monthly room checks on phone numbers will be implemented and overseen by administrator. Please refer to attachment titled PV-Phone numbers.

This POC is complete.

Completion Date: 06/18/2021

141a 1-10 Medical Evaluation Information

1. Requirements

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 DME dated [REDACTED] did not include the physician's professional license number of the physician who completed the medical exam for Resident #1.

Plan of Correction**Accept**

Building Administrator contacted physician's office that completed assessment and obtained the professional license number. Please refer to attachment titled [REDACTED] DME. Checking for professional license number will be added to the chart audits conducted periodically for compliance. The building administrator will oversee.

This POC is complete.

Completion Date: 06/18/2021

Update - 07/21/2021

Within 10 days of receipt of this plan of correction:

The administrator will audit all resident DME's to ensure that physicians perform all of the required actions during medical evaluations. The actions will be documented on the DME. Attachments will be added to form DME as needed to ensure that all actions are documented.

141a 1-10 Medical Evaluation Information (continued)

Document Submission**Implemented**

Audits were done on all DME's to ensure that physician's perform all required actions during medical evaluations. Please see attachment title PV DME Audits July 2021

Building Administrator contacted physician's office that completed assessment and obtained the professional license number. Please refer to attachment titled [REDACTED] DME. Checking for professional license number will be added to the chart audits conducted periodically for compliance. The building administrator will oversee.

This POC is complete.

Completion Date: 06/18/2021

162c - Menus Posted

1. Requirements

2600.

162.c. Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

Description of Violation

The home's menus that were posted did not include the month and date that the food items were being served. The upcoming weeks menu was not posted in a public and conspicuous area and the month and dates the food items were to be served were not included on the menu.

Plan of Correction**Accept**

The month and dates were immediately placed on menus and hung in a conspicuous area while inspector still on site Please refer to attachment titled PV-menu display. All kitchen staff were educated on regulation. Administrator to monitor.

This POC is complete.

Completion Date: 06/18/2021

Update - 07/21/2021

Please send/Attach proof of staff training. 7-21-21 [REDACTED]

Document Submission**Implemented**

The month and dates were immediately placed on menus and hung in a conspicuous area while inspector still on site Please refer to attachment titled PV-menu display. All kitchen staff were educated on regulation. Administrator to monitor.

This POC is complete.

Completion Date: 06/18/2021