

Department of Human Services  
Bureau of Human Service Licensing

July 2, 2021

[REDACTED] MANAGER  
BALA CYNWYD OPERATING LP  
1422 CLARKVIEW ROAD  
BALTIMORE, MD 21209

RE: SYMPHONY SQUARE AT BALA  
CYNWYD  
35 OLD LANCASTER ROAD  
BALA CYNWYD, PA, 19004  
LICENSE/COCC#: 14776

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/16/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Shawn Parker

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:** SYMPHONY SQUARE AT BALA CYNWYD      **License #:** 14776      **License Expiration Date:** 05/01/2022  
**Address:** 35 OLD LANCASTER ROAD, BALA CYNWYD, PA 19004  
**County:** MONTGOMERY      **Region:** SOUTHEAST

**Administrator**

**Name:** [REDACTED]      **Phone:** 6106606560      **Email:** [REDACTED]

**Legal Entity**

**Name:** BALA CYNWYD OPERATING LP  
**Address:** 1422 CLARKVIEW ROAD, BALTIMORE, MD, 21209  
**Phone:** 6106606560      **Email:** [REDACTED]

**Certificate(s) of Occupancy**

**Type:** Other      **Date:** 02/29/2012      **Issued By:** Lower Merion Twp

**Staffing Hours**

**Resident Support Staff:** 0      **Total Daily Staff:** 60      **Working Staff:** 45

**Inspection**

**Type:** Partial      **Notice:** Unannounced      **BHA Docket #:**  
**Reason:** Monitoring      **Exit Conference Date:** 06/16/2021

**Inspection Dates and Department Representative**

06/16/2021 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 64      **Residents Served:** 40

**Secured Dementia Care Unit**

**In Home:** Yes      **Area:** Memory Care      **Capacity:** 16      **Residents Served:** 11

**Hospice**

**Current Residents:** 2

**Number of Residents Who:**

**Receive Supplemental Security Income:** 0      **Are 60 Years of Age or Older:** 40  
**Diagnosed with Mental Illness:** 1      **Diagnosed with Intellectual Disability:** 0  
**Have Mobility Need:** 20      **Have Physical Disability:** 0

**Inspections / Reviews**

06/16/2021 Partial

**Lead Inspector:** [REDACTED]      **Follow-Up Type:** POC Submission      **Follow-Up Date:** 07/05/2021

Inspections / Reviews *(continued)*

7/1/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow Up Type: *Document Submission*Follow-Up Date: *07/06/2021*

7/2/2021 Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

**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 6/16/21 11:53 am, the glucometer for resident #1 was not calibrated with the correct date and time. It read 3/24/21 4:15 am.*

*A comparison was done between the information recorded on resident #1's blood glucose log and the blood sugar readings taken with resident #1's glucometer. The following discrepancies were found:*

*The glucometer shows reading of 158 for 3/25/21 at 9:13 am. This reading is not recorded on the blood glucose log.*

*The blood glucose log shows a reading of 200 on 6/15/21 at 8:36 pm. This reading is not on the glucometer.*

*The blood glucose log shows a reading of 182 on 6/15/21 at 5:01 pm. This reading is not on the glucometer.*

*The glucometer shows reading of 213 for 3/25/21 at 12:26 am. This reading is not recorded on the blood glucose log.*

*The blood glucose log shows a reading of 239 on 6/15/21 at 8:21 am. This reading is not on the glucometer.*

*The glucometer shows reading of 164 for 3/23/21 at 11:54 pm. This reading is not recorded on the blood glucose log.*

*The blood glucose log shows a reading of 200 on 6/10/21 at 9:01 pm. This reading is not on the glucometer.*

*The glucometer shows reading of 165 for 3/20/21 at 4:15 am. This reading is not recorded on the blood glucose log.*

*The blood glucose log shows a reading of 155 on 6/10/21 at 11:57 am. This reading is not on the glucometer.*

*The blood glucose log shows a reading of 239 on 6/8/21 at 11:50 am. This reading is not on the glucometer.*

*The glucometer shows reading of 213 for 3/18/21 at 4:03 am. This reading is not recorded on the blood glucose log.*

185a - Implement Storage Procedures *(continued)*

**Plan of Correction**

**Accept**

A. *With respect to the specific resident or event cited.*

- *Glucometer for resident #1 was not calibrated with correct date and time.*

B. *With respect to how the facility will identify residents with the potential for the identified concern and take corrective action.*

- *On the day of inspection, the Director of Health and Wellness (DHW) ordered a new blood glucose monitor for, resident #1 from the pharmacy, and it was calibrated to the correct date and time when delivered. No other residents were identified to be affected.*

C. *With respect to what systemic measures have been put in place to address the stated concern.*

- *Our DHW and Memory Support Director (MSD) in-serviced med techs and nursing staff to demonstrate how to calibrate the glucometers and change the date and time when necessary. See attached.*

D. *With respect to how the plan of corrective measures will be monitored.*

- *To prevent this violation from recurring, The Director of Health and Wellness (DHW) and Memory Support Director (MSD) will review glucometer machine readings and MAR for consistent documentation weekly x4 weeks, then monthly x3 months and report audit results to Quality Assurance meeting. The Executive Director and DHW will review the MAR's for all residents with glucometers at least monthly for the next 3 months to ensure the residents glucometer readings are recorded accurately, starting with 30 days of receipt of this plan of correction.*

*See attached:*

- *In-service documentation*
- *Audit sheet*

**Completion Date:** *06/16/2021*

**Document Submission**

**Implemented**

*See attached:*

*In-service documentation*

*Glucometer audit sheet*