

RECOMMENDATION FOR CERTIFICATE OF COMPLIANCE (RENEWALS ONLY)

INSTRUCTIONS: Regional Program Office completes form, makes two copies, keeps one copy and forwards the original and one copy to the Licensing Office. (This form is to be used for RENEWALS ONLY.)

REGION SOUTHEAST		COUNTY BUCKS	
NAME AND ADDRESS OF AGENCY/FACILITY BEECHWOOD CENTER 5			
135 WEST RICHARDSON AVENUE.			
LANGHORNE 19047		LEGAL MAIL	
MAILING ADDRESS OF FACILITY ATTN DAWN SHAFFER			
469 E. MAPLE AVE.			
LANGHORNE PA 19047		TELEPHONE NO.: 215-750-4001	
NAME OF LEGAL ENTITY WOODS SERVICES, INC.		FENSSIN	
CURRENT CERTIFICATE NUMBER	➤ 129670	TYPE OF CONTROL	<input type="checkbox"/> PUBLIC <input checked="" type="checkbox"/> PRIVATE
EFFECTIVE DATE	➤ FROM 07-30-2021 TO 07-30-2022	IF PRIVATE	<input type="checkbox"/> PROFIT <input checked="" type="checkbox"/> NON-PROFIT

TYPE OF FACILITY & TYPE OF SERVICE PROVIDED:	
ADULT RESIDENTIAL FACILITIES PERSONAL CARE HOMES	
DATE(S) OF INSPECTION	➤ 07-01-2021

RECOMMENDATIONS:			
<input checked="" type="checkbox"/> CERTIFICATE RECOMMENDED	TYPE <input checked="" type="checkbox"/> REGULAR <input type="checkbox"/> PROVISIONAL	IF PROVISIONAL <input type="checkbox"/> FIRST <input type="checkbox"/> SECOND <input type="checkbox"/> THIRD <input type="checkbox"/> FOURTH	
		SCORE	PERIOD FROM _____ TO _____
<input type="checkbox"/> CERTIFICATE NOT RECOMMENDED	REASON <input type="checkbox"/> DENIAL <input type="checkbox"/> NON-RENEWAL <input type="checkbox"/> REVOCATION <input type="checkbox"/> VOLUNTARY CLOSURE <input type="checkbox"/> OTHER		
LIST REGULATION CHAPTER 2600		FIRE SAFETY APPROVAL	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
		DATE 10/20/89	TYPE other
		LICENSED CAPACITY 7	CURRENT CENSUS 7

LIST ANY RESTRICTIONS TO OCCUPANCY OR WAIVERS OF REGULATION

[Redacted]

MAKING RECOMMENDATION
APPROVED BY

Department of Human Services
Bureau of Human Service Licensing

July 30, 2021

[REDACTED]
WOODS SERVICES, INC.
469 E. MAPLE AVE
ATTN DAWN SHAFFER
LANGHORNE, PA 19047

RE: BEECHWOOD CENTER 5
135 WEST RICHARDSON AVENUE
LANGHORNE, PA, 19047
LICENSE/COC#: 12967

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/01/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
[REDACTED]

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 5* License #: *12967* License Expiration Date: *11/01/2021*
Address: *135 WEST RICHARDSON AVENUE, 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: *10/20/1989* Issued By: *COPA L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *7* Waking Staff: *5*

Inspection

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *07/01/2021*

Inspection Dates and Department Representative

07/01/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *7* Residents Served: *7*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *6* Are 60 Years of Age or Older: *3*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *0* Have Physical Disability: *1*

Inspections / Reviews

07/01/2021 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *07/19/2021*

Inspections / Reviews *(continued)*

7/22/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *07/29/2021*

7/30/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

20b1 - Financial Records

1. Requirements

2600.

20.b. If the home provides assistance with financial management or holds resident funds, the following requirements apply:

- 1. The home shall keep a record of financial transactions with the resident, including the dates, amounts of deposits, amounts of withdrawals and the current balance.

Description of Violation

The home manages the finances for resident #1. However, The home's financial transaction record calculation is incorrect. The residents record indicates that they should have [redacted] in cash available, however the transaction record is miscalculated showing the resident has [redacted].

Plan of Correction

Accept

During an inspection of Beechwood Center #5 it was found that the home's financial transaction record calculation was incorrect. It is important that all finances are calculated correctly and the available funds match the record. To ensure that the calculations were correct, the Assistant Director of Beechwood audited all resident financial records for Center #5. This audit will continue to occur on a monthly basis to ensure continued compliance.

Completion Date: 07/16/2021

Document Submission

Implemented

July audit attached.

54a - Direct Care Staff

1. Requirements

2600.

54.a. Direct care staff persons shall have the following qualifications:

- 1. Be 18 years of age or older, except as permitted in subsection (b).
- 2. Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry.

Description of Violation

Direct care staff person A, does not have a high school diploma, GED, or active registry status on the Pennsylvania nurse aide registry. Staff person A had a license as a Practical Nurse, however this expired [redacted] and the staff person or the home could not provide verification of a valid license.

Plan of Correction

Accept

During an inspection at Beechwood Center #5 staff A did not have a valid license on file. It is essential that all staff members providing direct care for residents have valid certifications or licensures. All professional licensed employees are expected to maintain current license and provide copy to be on file. Moving forward, Director of Health & Wellness will create tracking system of all nursing licenses. Director of Health & Wellness will also provide reminders which will be emailed two months prior to approaching due date of renewal. This will ensure compliance of all licensed medical staff. Director of Health & Wellness met with Staff person A to review the importance of her current license being on file on July 1, 2021.

Completion Date: 07/02/2021

Document Submission

Implemented

Meeting documentation attached.

88a - Surfaces

1. Requirements

88a - Surfaces (continued)

2600.

88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

On 7/1/21 the baseboard heater cover is detached and causing a tripping hazard near bedroom #2.

Plan of Correction

Accept

During an inspection of Beechwood Center #5 on 7/1/21 the baseboard heater cover was detached posing as a tripping hazard. It is important to keep all walkways clear and free from tripping hazards. The cover was reattached and maintenance was notified to evaluate and provide a more permanent solution to prevent the cover from detaching.

Completion Date: 07/26/2021

Document Submission

Implemented

Photo of repair attached.

101j7 - Lighting/Operable Lamp

1. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

Resident rooms #3 and #7 do not have a source of light that can be turned on/off at bedside. There are currently residents residing in each room.

Plan of Correction

Accept

During an inspection of Beechwood Center #5 on 7/1/21 it was noticed that two bedrooms did not have bedside lamps. Bedside lamps are important for resident safety during transfers in and out of their beds. Replacement lamps were removed from storage and placed next to each of the beds. Bedside lamps will be checked monthly by management during an environmental review.

Completion Date: 07/09/2021

Document Submission

Implemented

Environmental review and requisition attached.

103e - Left Overs

1. Requirements

2600.

103.e. Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

Description of Violation

On 7/1/21, there was an unlabeled, undated container of juice and a plastic bag of onions in kitchen refrigerator.

103e - Left Overs (continued)

Plan of Correction

Accept

During an inspection of Beechwood Center #5 on 7/1/21 food was observed in the refrigerator having no labels. Food safety is important due to the health risks associated with spoiled food. Food labeling protocols were implemented following this observation. All unlabeled items will be discarded immediately and the home has implemented a weekly cleanout to occur on Wednesday mornings.

Completion Date: 07/02/2021

Document Submission

Implemented

Meeting minutes attached.

103f - Refrigerator/Freezer Temps

1. Requirements

2600.

103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

Description of Violation

On 7/1/21, there was no thermometer in the freezer of the refrigerator/freezer unit in the basement. Additionally the refrigerator temperature at 9:30am is 42 degrees Fahrenheit and the chest freezer also located in the basement had a temperature of 10 degrees Fahrenheit.

On 7/1/21, there was no thermometer in the chest freezer in the kitchen/dining room area.

On 7/1/21 there was no thermometer in either the refrigerator or freezer in the kitchen.

Plan of Correction

Accept

During an inspection of Beechwood Center #5 on 7/1/21 it was observed that there was a lack of thermometers in freezers and temperatures were too high due to placement. It is important that food is stored at proper temperature to ensure safe cooking and consuming practices. The PCHA has placed an order for additional thermometers to be placed in the proper locations so temperatures can be read and monitored correctly.

Completion Date: 07/23/2021

Document Submission

Implemented

Photos of new thermometers.

183b - Meds and Syringes Locked

1. Requirements

2600.

183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

Description of Violation

On 7/1/21 at 10:00am, a box of Sultab Supplement tablets was unlocked, unattended, and accessible on the shelf near the medication cart.

Plan of Correction

Accept

During an inspection of Beechwood Center #5 on 7/1/21 an unlabeled medication was found in an unlocked area. The medication was placed in a locked area at the time of inspection. It is important that all medications are kept in a locked container for health and safety of the residents. Medication storage was added to the monthly environmental reviews conducted by management to ensure safe storage within the household.

Completion Date: 07/16/2021

183b - Meds and Syringes Locked *(continued)*

Document Submission

Implemented

Environmental review attached.

184b - Resident's Meds Labeled

1. Requirements

2600.

184.b. If the OTC medications and CAM belong to the resident, they shall be identified with the resident's name.

Description of Violation

On 7/1/21, a package of Sultab Supplements on the shelf near the medication cart and was not labeled with a resident's name.

Plan of Correction

Accept

During an inspection of Beechwood Center #5 on 7/1/21 an unlabeled package of supplements was identified. The owner of the supplements is unknown and will be discarded. It is important that all OTC items are properly labeled for health and safety reasons. If any of the residents of the home desire to have OTC supplements nursing will be notified and proper labels/orders will be obtained to identify who it belongs to.

Completion Date: 07/09/2021

Document Submission

Implemented

July Medication Cart check attached.