

Department of Human Services
Bureau of Human Service Licensing

August 27, 2021

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

RE: BEECHWOOD CENTER 7
228 SOUTH BELLEVUE AVENUE
LANGHORNE, PA, 19047
LICENSE/COC#: 12969

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/14/2021 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 7* License #: *12969* License Expiration Date: *11/01/2021*
Address: *228 SOUTH BELLEVUE 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., [REDACTED], LANGHORNE, PA, 19047*
Phone: *2157504001* Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-3 SP* Date: *06/11/1991* Issued By: *COPA L & I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *6* Waking Staff: *5*

Inspection

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *07/14/2021*

Inspection Dates and Department Representative

07/14/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *8* Residents Served: *6*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *1* Are 60 Years of Age or Older: *2*
Diagnosed with Mental Illness: *3* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *0* Have Physical Disability: *3*

Inspections / Reviews

07/14/2021 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *08/15/2021*

Inspections / Reviews *(continued)*

8/16/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *08/23/2021*

8/27/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

26b - Quality Management Plan Content

1. Requirements

2600.

26.b. The quality management plan shall address the periodic review and evaluation of the following:

Description of Violation

The home's quality management review is required to be completed yearly. The home's last completed quality management review was January 2019.

Plan of Correction

Accept

The quality management plan is important to ensure a systematic tool for identifying and addressing problems with care and management of the home. On 6/23/21 a meeting was held between the Director of Licensing and Accreditation and the Director of Community Residences to review the regulation. The Director of Community Residences will be meeting with the management group for Center 9 to complete an updated Quality Management Plan. Every January the Director of Community Residences will schedule a meeting with the management team to review and establish a quality management plan for the home. The plan will be completed and written annually.

Completion Date: 08/13/2021

Document Submission

Implemented

QM plan complete and attached.

121a - Unobstructed Egress

1. Requirements

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

On 7/14/21 at 9:10 A.M., the storm door off the kitchen was locked and a blocked egress from the home's kitchen door exit.

On 7/14/21 at 9:11 A.M., the steps leading out of the basement exit were crumbling and had debris causing a tripping hazard and blocking the egress from the home's basement exit.

Plan of Correction

Accept

During an inspection of Beechwood Center #7 on 7/14/21 two exit locations were noted to have concerns blocking the egress. The storm door off the kitchen was locked at the time of inspection posing a safety concern as it can prevent immediate egress in the event of an emergency. The door was unlocked at the time of inspection and a sign was placed on the door to remind occupants that it should remain unlocked. Additionally during the inspection another egress was noted to have debris at the exit along with an unstable step. On the day of inspection the debris was removed and a maintenance request was placed to secure the step. To prevent future egress concerns, the condition of the concrete will be monitored during the monthly environmental review by the Personal Care Home Administrator. Both items of concern were reviewed with staff during the August 228 home meeting. Topics included the meaning of egress as it relates to 228 and more importantly how it is broken down in the 2600 PA regulations.

Completion Date: 08/20/2021

121a - Unobstructed Egress (continued)

Document Submission

Implemented

A request was made for step repair, staff meeting complete to address egress, sign was hung as a reminder and monthly checks added to environmental review.

141b1 - Annual Medical Evaluation

1. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident #1's most recent medical evaluation was completed on [REDACTED]. The resident's previous medical evaluation was completed on [REDACTED].

Plan of Correction

Accept

Resident #1's most recent medical evaluation was completed on [REDACTED]. The resident's previous medical evaluation was completed on [REDACTED]. Each resident's medical evaluation should be completed annually. The medical scheduler secretary will be sure each individual's medical evaluation is scheduled at the time of current evaluation for the following year to ensure appointment is made for the following year. Canceled appointments are tracked in an electronic healthcare record to account for any delayed or canceled appointments. Director of Health & Wellness will also review appointments to ensure their completion.

Completion Date: 08/13/2021

Document Submission

Implemented

The annual appointments will continue to be scheduled for the following year at the time of the appointment. The Director of Health & Wellness is reviewing appointments to ensure their completion.