

Department of Human Services
Bureau of Human Service Licensing

May 5, 2022

[REDACTED], ADMINISTRATOR
[REDACTED]
[REDACTED]

RE: WAVERLY HEIGHTS
P.O.BOX 179, 1400 WAVERLY ROAD
GLADWYNE, PA, 19035
LICENSE/COC#: 12782

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/11/2022, 04/12/2022 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: *WAVERLY HEIGHTS* License #: *12782* License Expiration: *06/08/2023*
Address: *P.O.BOX 179, 1400 WAVERLY ROAD, GLADWYNE, PA 19035*
County: *MONTGOMERY* Region: *SOUTHEAST*

Administrator

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

Legal Entity

[REDACTED]

Certificate(s) of Occupancy

Type: *I-2* Date: *12/21/2021* Issued By: *Lower Merion Township*
Type: *C-1* Date: *02/10/1992* Issued By: *Dept of Health*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *57* Waking Staff: *43*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *04/12/2022*

Inspection Dates and Department Representative

04/11/2022 - On-Site: [REDACTED]
04/12/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *82* Residents Served: *48*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *48*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *9* Have Physical Disability: *0*

Inspections / Reviews

04/11/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/05/2022*

Inspections / Reviews (*continued*)

05/04/2022 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *05/09/2022*

05/05/2022 - Document Submission

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

On 4/11/22, the home had 2 boilers with expired boiler certificates. Certificates expired on 2/3/22 for 317351B and 317352B.

Plan of Correction

Accept

Effective 4/29/22, the outdated boiler inspections were completed. Per the company, the inspections had been delayed due to limited staffing. Moving forward to prevent a re-occurring violation, the Director of Maintenance, or designated representative, will audit boiler certificates quarterly to ensure that they are current and will schedule inspections accordingly. Proof of inspection conducted on 4/29/22 is attached, as well as a completed audit.

Completion Date: 04/29/2022

Document Submission

Implemented

Completed inspection and completed audit form attached.

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

On 4/11/22 at 10:25am, There are no emergency telephone numbers to include the nearest hospital and fire department on or by the telephone in bedroom W231.

Plan of Correction

Accept

Effective immediately at the time of inspection, 4/11/22, the telephone tag was placed on the phone located in W231. Moving forward to prevent a re-occurring violation, the Personal Care Administrator, or designated representative, will complete a monthly audit to verify the presence of the emergency telephone number tags on all phones with an outside line. Completed audit form is attached.

Completion Date: 04/11/2022

Document Submission

Implemented

Completed audit form attached

103i - Outdated Food

1. Requirements

2600.

103.i. Outdated or spoiled food or dented cans may not be used.

Description of Violation

On 4/11/22 at 10:12am in dry food storage there was the following foods that were past their use by dates in dry food storage: Lentil Beans good thru 3/5/22, spaghetti good thru 2/1/22, spaghetti good thru 3/26/21, box of corn meal good thru 3/20/22, box of yellow cake mix best by 3/15/21.

103i - Outdated Food (continued)

On 4/11/22 at 10:15AM in the walk-in freezer there were 3 ice cream tubs with a best by date of 9/30/21.

Plan of Correction

Accept

Effectively immediately at the time of inspection, the outdated food items were disposed of. Moving forward to prevent a re-occurring violation, routine staff training will continue and the Health Care Dining Manager, or designated representative, will conduct weekly audits to ensure there is no presence of outdated or spoiled food items. Associated in-servicing and completed audit are attached (completed 4/26/22 and 4/27/22).

Completion Date: 04/27/2022

Document Submission

Implemented

Completed staff training and completed audit attached

183e - Storing Medications

1. Requirements

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

Description of Violation

On 4/12/22 at 9:20am there was 2 loose white oval pills and 1 circular brownish pill on the Windsor Medication cart.

On 4/12/22 at 9:40am, there was 1 loose circular white pill on the Devonshire Medication cart.

Plan of Correction

Accept

Effective immediately at the time of inspection, the loose pills located in the medication cart were removed and disposed of appropriately. To prevent a re-occurring violation, weekly medication cart audits were updated to include inspecting the cart for the presence of any loose pills. Associated policy and completed audit attached.

Completion Date: 04/25/2022

Document Submission

Implemented

Associated policy and completed audit attached.