

Department of Human Services
Bureau of Human Service Licensing

June 23, 2022

[REDACTED]
RURAL LIVING INC
[REDACTED]

RE: WYNWOOD HOUSE AT GREENHILLS
301 FARMSTEAD LANE
STATE COLLEGE, PA, 16803
LICENSE/COC#: 24323

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/14/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Michele Moskalczyk
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 GREENHILLS License #: 24323 License Expiration: 12/13/2022
Address: 301 FARMSTEAD LANE, STATE COLLEGE, PA 16803
County: CENTRE Region: NORTHEAST

Administrator

Name: [REDACTED] Phone: 8142349898 Email: [REDACTED]

Legal Entity

Name: RURAL LIVING INC
Address: 220 REGENT COURT, SUITE E-1, STATE COLLEGE, PA, 16801
Phone: 8142349898 Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 04/07/1997 Issued By: PALI

Staffing Hours

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

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint Exit Conference Date: 04/14/2022

Inspection Dates and Department Representative

04/14/2022 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 47 Residents Served: 34

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 2

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 34
Diagnosed with Mental Illness: 2 Diagnosed with Intellectual Disability: 2
Have Mobility Need: 4 Have Physical Disability: 0

Inspections / Reviews

04/14/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 06/12/2022

Inspections / Reviews (*continued*)

06/12/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: *06/17/2022*

06/23/2022 - 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

The Care Facility Carbon Monoxide Alarms Standard Act requires that all CO2 detectors operating with a battery be changed annually and dated with battery installation date. On 4/14/2022, the CO2 detector in the 1st floor laundry room had a battery with an installed date of 3/21/2021.

Plan of Correction

Battery was immediately replaced and labeled with the installation date. Detectors will be monitored and added to the maintenance checklist. The administrator will oversee and monitor for continued compliance. Please see attachment titled GH-carbon monoxide detector.

Accept

This POC is complete.

Completion Date: 04/15/2022

Update: 06/12/2022

Please send proof (picture) of compliance.

Document Submission

Battery was immediately replaced and labeled with the installation date. Detectors will be monitored and added to the maintenance checklist. The administrator will oversee and monitor for continued compliance. Please see attachment titled GH-carbon monoxide detector and GH-Maintenance Checklist

Implemented

This POC is complete.

182c - Medication Administration

1. Requirements

2600.

182.c. Medication administration includes the following activities, based on the needs of the resident:

Description of Violation

Residents 1, 2, & 3 stated that their medications are often left for them in their rooms and that they are not observed while taking them. Each resident states that this occurs at least once per week. On 4/14/2022 at 9:45am, Licensing Representative observed 2 pills on the nightstand of Resident 4. Resident 4 stated that the pills were 2 of her AM pills from this morning. Staff Member A states that the pills were left for Resident 4 in their room. Resident 5 stated that pills were left for residents at the dining table on 3/13/2022. Staff Member B verified that the pills were left at the resident's tables on 3/13/2022 by Staff Member C.

Plan of Correction

Pills were immediately removed from nightstand while inspector still on site. All med techs have been given a re-education on proper medication administration. Please see the attachment titled GH-med refresher. The administrator will conduct weekly checks on all rooms to ensure that no medications are left behind. The administrator will oversee to maintain compliance.

Accept

This POC is complete.

Completion Date: 04/20/2022

182c - Medication Administration (continued)**Update:** 06/12/2022*Please send proof of staff education.***Document Submission****Implemented**

Pills were immediately removed from nightstand while inspector still on site. All med techs have been given a re-education on proper medication administration. Please see the attachment titled GH-med refresher. The administrator will conduct weekly checks on all rooms to ensure that no medications are left behind. The administrator will oversee to maintain compliance.

*This POC is complete.***187b - Date/Time of Medication Admin.****1. Requirements**

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

Staff Member A initialed that Resident 4 had been administered their 9:00am 500mg D-Mannose medication and their 9:00am 25MEQ Potassium medication on 4/14/2022. The two medications were observed on the nightstand of Resident 4 and had not been taken at the time the MAR was initialed.

Plan of Correction**Accept**

The medications were immediately removed from the nightstand while inspector still on site. All med techs have been given a med refresher training. Please see attachment titled GH-med refresher. The administrator will oversee to ensure continued compliance.

*This POC is complete.***Completion Date:** 04/20/2022**Document Submission****Implemented**

The medications were immediately removed from the nightstand while inspector still on site. All med techs have been given a med refresher training. Please see attachment titled GH-med refresher. The administrator will oversee to ensure continued compliance.

This POC is complete.