

Department of Human Services
Bureau of Human Service Licensing

June 13, 2022

[REDACTED]
MG MEDIA SUBTENANT LLC
[REDACTED]
[REDACTED]

RE: TRUEWOOD BY MERRILL, GLEN
RIDDLE
263 GLEN RIDDLE ROAD
MEDIA, PA, 19063
LICENSE/COC#: 14582

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/19/2022 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 - PUBLIC

Facility Information

Name: TRUEWOOD BY MERRILL, GLEN RIDDLE License #: 14582 License Expiration: 02/08/2023
Address: 263 GLEN RIDDLE ROAD, MEDIA, PA 19063
County: DELAWARE Region: SOUTHEAST

Administrator

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

Legal Entity

Name: MG MEDIA SUBTENANT LLC
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 07/01/1996 Issued By: COPA Labor & Industry

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 120 Waking Staff: 90

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Incident Exit Conference Date: 04/19/2022

Inspection Dates and Department Representative

04/19/2022 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 153 Residents Served: 84

Secured Dementia Care Unit

In Home: Yes Area: GARDEN HOUSE Capacity: 41 Residents Served: 30

Hospice

Current Residents: NM

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 84
Diagnosed with Mental Illness: 1 Diagnosed with Intellectual Disability: 1
Have Mobility Need: 36 Have Physical Disability: 0

Inspections / Reviews

04/19/2022 - Partial

Lead Inspector: [REDACTED] Follow Up Type: POC Submission Follow Up Date: 05/29/2022

Inspections / Reviews *(continued)*

06/07/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: *06/10/2022*

06/13/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [redacted]/21, staff person A observed resident #1 [redacted] y push resident #2 to the floor unprovoked. [redacted] Resident #2 [redacted] sent to the hospital for further assessment. Resident #2 [redacted] as result of this incident.

On [redacted]/22, at [redacted] am, staff person B, was instructed by staff person C to put resident #3 to bed. Staff person B walked the resident to [redacted] room and told [redacted] to go to bed then left the room. [redacted] Staff person B came into the room and was observed on camera trying to force resident #3 to bed. Staff person B is heard saying " Oh you think you're tough!" " Grow [redacted] up!" " Don't come back out here! They are doing the floors!" " Don't come back out here, you are not wanted"! Staff person B, failed to utilize positive cueing while assisting resident # 3 with sleep management.

Plan of Correction

Accept

Resident #1 was sent to the hospital [redacted]. Staff were present and close, but this action was unprovoked and could not have been prevented which was promptly reported as per regulations. Staff Person B was immediately put on suspension pending investigation. Staff B completed the following training on May 6, 2022
Cultural Competence
Teepa Snow Dementia 101
Person Centered Care Planning for People Living with Dementia
Understanding Mental Illness
Managing Aggressive Behavior
Care of Residents with Dementia in AL (PC)
Dementia Care: Challenging Behaviors
Essentials of Resident Rights
Dementia Care: Challenging Behaviors and Direct Care Staff
PA Mandatory Abuse Reporting Training Course on June 1, 2022
Staff B apologized to the family who did not want [redacted] terminated and is now on a plan of supervision for thirty days. Employee Assistance Program is available for all staff that are having difficulty at work and the poster is by the time clock. It is also posted in the breakroom (June 1, 2022)
All staff will complete the same training by December 31,2022. This will be monitored by the Resident Care Director and/or General Manager.

Completion Date: 12/31/2022

Document Submission

Implemented

Resident #1 was sent to the hospital [redacted]. Staff were present and close, but this action was unprovoked and could not have been prevented which was promptly reported as per regulations. Staff Person B was immediately put on suspension pending investigation.

42b - Abuse (continued)

Staff B completed the following training on May 6, 2022

Cultural Competence

Teepa Snow Dementia 101

Person Centered Care Planning for People Living with Dementia

Understanding Mental Illness

Managing Aggressive Behavior

Care of Residents with Dementia in AL (PC)

Dementia Care: Challenging Behaviors

Essentials of Resident Rights

Dementia Care: Challenging Behaviors and Direct Care Staff

PA Mandatory Abuse Reporting Training Course on June 1, 2022

Staff B apologized to the family who did not want [REDACTED] terminated and is now on a plan of supervision for thirty days.

Employee Assistance Program is available for all staff that are having difficulty at work and the poster is by the time clock. It is also posted in the breakroom (June 1, 2022)

All staff will complete the same training by December 31,2022. This will be monitored by the Resident Care Director and/or General Manager.

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

VIOLATION WITHDRAWN MJ 6/13/22

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

VIOLATION WITHDRAWN MJ 6/13/22

201 - Positive Interventions

1. Requirements

2600.

201. Safe Management Techniques - The home shall use positive interventions to modify or eliminate a behavior that endangers the resident himself or others. Positive interventions include improving communications, reinforcing appropriate behavior, redirection, conflict resolution, violence prevention, praise, deescalation techniques and alternative techniques or methods to identify and defuse potential emergency situations.

Description of Violation

Resident #1, displayed aggression towards resident #2 on [redacted] /21, which resulted in the resident [redacted] The home failed to implement positive interventions to modify or eliminate the aggressive behavior. On [redacted] 21, resident #1 displayed another act of aggression toward resident #4 which resulted in [redacted]

Plan of Correction

Accept

Resident #1 no longer lives in this community. All caregivers, including nurses, will receive training on how to implement positive interventions to modify or eliminate aggressive behavior. This training shall be completed by September 15, 2022 and monitored by the Resident Care Director and/or General Manager.

Completion Date: 09/15/2022

Document Submission

Implemented

Resident #1 no longer lives in this community. All caregivers, including nurses, will receive training on how to implement positive interventions to modify or eliminate aggressive behavior. This training shall be completed by September 15, 2022 and monitored by the Resident Care Director and/or General Manager.

234d - Support Plan Revision

1. Requirements

2600.

234.d. The support plan shall be revised at least annually and as the resident's condition changes.

Description of Violation

A support plan for resident #1 was completed on [redacted] /21; however, the support plan was not updated to reflect the aggressive behavior that the resident displayed on [redacted] /21 with resident #2 and on [redacted] /21 with resident #3.

Plan of Correction

Accept

Resident #1 is no longer in our community. All team members whose responsibility includes developing care plans shall receive training on how to update and

234d - Support Plan Revision (continued)

Implement positive interventions to modify or eliminate aggressive behavior. This training shall be done by the Regional Nurse and completed by August 1, 2022.

Care plans of residents with incidents or aggressive behavior will be reviewed to ensure that positive interventions are implemented to modify or eliminate aggressive behavior. (June 6, 2022)

Complete review to ensure that all support plans are revised at least annually and with condition change. (July 1, 2022)

Completion Date: 07/01/2022

Document Submission

Implemented

Resident #1 is no longer in our community.

All team members whose responsibility includes developing care plans shall receive training on how to update and implement positive interventions to modify or eliminate aggressive behavior. This training shall be done by the Regional Nurse and completed by August 1, 2022.

Care plans of residents with incidents or aggressive behavior will be reviewed to ensure that positive interventions are implemented to modify or eliminate aggressive behavior. (June 6, 2022)

Complete review to ensure that all support plans are revised at least annually and with condition change. (July 1, 2022)

235 - Discharge/Transfer/Closure**1. Requirements**

2600.

235. Discharge - If the home initiates a discharge or transfer of a resident, or the legal entity chooses to close the home, the administrator shall give a 30-day advance written notice to the resident, the resident's designated person and the referral agent citing the reasons for the discharge or transfer. This requirement shall be stipulated in the resident-home contract signed prior to admission to the secured dementia care unit.

Description of Violation

On [REDACTED]/22, the home discharged resident #1 due to a need for a higher level of care [REDACTED]. However, the home did not give a formal written 30 day notice.

Plan of Correction

Accept

Our residency agreement provides for a thirty-day notice but lists exceptions to that notice and one of the exceptions is "the safety or health of individuals in the community is in danger". All residents and, if indicated, their responsible party, sign this agreement.

Going forward, we shall issue a written thirty-day notice and if the resident returns from a higher level of care during that notice, the community may require 1:1 care as appropriate for the duration of the notice. (June 6, 2022).

Completion Date: 06/06/2022

Document Submission

Implemented

Our residency agreement provides for a thirty-day notice but lists exceptions to that notice and one of the exceptions is "the safety or health of individuals in the community is in danger". All residents and, if indicated, their responsible party, sign this agreement.

Going forward, we shall issue a written thirty-day notice and if the resident returns from a higher level of care during that notice, the community may require 1:1 care as appropriate for the duration of the notice. (June 6, 2022).

235 - Discharge/Transfer/Closure (continued)