

Department of Human Services
Bureau of Human Service Licensing

November 2, 2022

[REDACTED]
DUNWOODY VILLAGE INC
3500 WEST CHESTER PIKE
ATTN:PERSONAL CARE SERVICES
NEWTOWN SQUARE, PA, 19073

RE: DUNWOODY VILLAGE
3500 WEST CHESTER PIKE
NEWTOWN SQUARE, PA, 19073
LICENSE/COC#: 14525

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/13/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC

Facility Information

Name: *DUNWOODY VILLAGE* License #: *14525* License Expiration: *12/22/2022*
Address: *3500 WEST CHESTER PIKE, NEWTOWN SQUARE, PA 19073*
County: *DELAWARE* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *DUNWOODY VILLAGE INC*
Address: *3500 WEST CHESTER PIKE, ATTN:PERSONAL CARE SERVICES, NEWTOWN SQUARE, PA, 19073*
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-1* Date: *01/30/2002* Issued By: *CWOPA L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *99* Waking Staff: *74*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Incident* Exit Conference Date: *07/13/2022*

Inspection Dates and Department Representative

07/13/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *81* Residents Served: *79*

Secured Dementia Care Unit

In Home: *Yes* Area: *SDCU* Capacity: *20* Residents Served: *20*

Hospice

Current Residents: *1*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *78*
Diagnosed with Mental Illness: *30* Diagnosed with Intellectual Disability: *1*
Have Mobility Need: *20* Have Physical Disability: *0*

Inspections / Reviews

07/13/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *07/24/2022*

Inspections / Reviews *(continued)*

07/21/2022 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/01/2022

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: 08/01/2022

11/02/2022 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/01/2022

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

141a 1-10 Medical Evaluation Information

1. Requirements

2600.

- 141.a. A resident shall have a medical evaluation by a physician, physician’s assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:
 - 1. A general physical examination by a physician, physician’s assistant or nurse practitioner.
 - 2. Medical diagnosis including physical or mental disabilities of the resident, if any.
 - 3. Medical information pertinent to diagnosis and treatment in case of an emergency.
 - 4. Special health or dietary needs of the resident.
 - 5. Allergies.
 - 6. Immunization history.
 - 7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
 - 8. Body positioning and movement stimulation for residents, if appropriate.
 - 9. Health status.
 - 10. Mobility assessment, updated annually or at the Department’s request.

Description of Violation

Resident 1's medical evaluation dated [redacted] not include weight, pulse rate, blood pressure and temperature.

POC Submission

Accept

A procedural error caused the DME to not be completely filled out, leaving several blanks on the form. This procedural error was corrected and all DME's were audited to ensure completeness. The audits were completed by July 14th. The particular DME identified was corrected with an update, ensuring all blanks are filled out completely. All Nursing staff (that are responsible for completing the DME's) will be educated about the requirement that all information be recorded in the proper places on the DME form. This education will be completed by July 31st, 2022. We will continue to complete monthly DME audits to ensure compliance with this plan of correction. Audits will be discontinued after three months of successful documentation showing no missed information.

Licensee's Proposed Overall Completion Date: 07/31/2022

Document Submission

Implemented (MJ - 11/02/2022)

A procedural error caused the DME to not be completely filled out, leaving several blanks on the form. This procedural error was corrected and all DME's were audited to ensure completeness. The audits were completed by July 14th. The particular DME identified was corrected with an update, ensuring all blanks are filled out completely. All Nursing staff (that are responsible for completing the DME's) will be educated about the requirement that all information be recorded in the proper places on the DME form. This education will be completed by July 31st, 2022. We will continue to complete monthly DME audits to ensure compliance with this plan of correction. Audits will be discontinued after three months of successful documentation showing no missed information.

Licensee's Proposed Overall Completion Date: 11/01/2022

227d - Support Plan Medical/Dental

2. Requirements

2600.

- 227.d. Each home shall document in the resident’s support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident’s physician, physician’s assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

227d - Support Plan Medical/Dental (continued)

Description of Violation

The assessment for resident 1, dated [REDACTED] indicates the resident has a need for mental health support. The resident's support plan, dated [REDACTED] does not list the residents psychological diagnoses; however the RASP documents how these need will be met.

POC Submission

Accept

The diagnosis on the section that addressed the resident's mental health needs was not filled-out, despite indicating that the resident needs some support in this area. This was an oversight in completing the form. We are in the process of auditing our RASP Care Plan forms to ensure that we don't overlook important information. This resident's RASP was updated to include the diagnosis that was missed.

All staff involved with completing the RASP (care plans) will be educated about completing all areas of the care plans completely. The RASP audits and updates will be completed by July 31st, 2022. We will thoroughly audit the RASP documentation on a monthly basis. The audits will be discontinued after three months of successful audits showing no missed documentation.

Licensee's Proposed Overall Completion Date: 07/31/2022

Document Submission

Implemented (MJ - 11/02/2022)

The diagnosis on the section that addressed the resident's mental health needs was not filled-out, despite indicating that the resident needs some support in this area. This was an oversight in completing the form. We are in the process of auditing our RASP Care Plan forms to ensure that we don't overlook important information. This resident's RASP was updated to include the diagnosis that was missed.

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