

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

January 6, 2023

[REDACTED], ED
WOODS SERVICES

RE: BEECHWOOD CENTER 10
588 BEECHWOOD CIRCLE
LANGHORNE, PA, 19047
LICENSE/COC#: 14148

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/03/2022 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

Facility Information

Name: BEECHWOOD CENTER 10 License #: 14148 License Expiration: 05/02/2023
Address: 588 BEECHWOOD CIRCLE, LANGHORNE, PA 19047
County: BUCKS Region: SOUTHEAST

Administrator

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

Legal Entity

Name: WOODS SERVICES
Address: [REDACTED]
Phone: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: Total Daily Staff: 10 Waking Staff: 8

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Incident Exit Conference Date: 11/03/2022

Inspection Dates and Department Representative

11/03/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
License Capacity: 8 Residents Served: 8
Secured Dementia Care Unit
In Home: No Area: Capacity: Residents Served:
Hospice
Current Residents: 0
Number of Residents Who:
Receive Supplemental Security Income: 6 Are 60 Years of Age or Older: 4
Diagnosed with Mental Illness: 1 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 2 Have Physical Disability: 8

Inspections / Reviews

11/03/2022 Partial
Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 11/26/2022

11/28/2022 - POC Submission
Submitted By: [REDACTED] Date Submitted: 12/30/2022
Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 12/03/2022

Inspections / Reviews *(continued)*

12/02/2022 POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/30/2022

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 12/31/2022

01/06/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/30/2022

Reviewer: [REDACTED]

Follow Up Type: Not Required

15a - Resident Abuse Report

1. Requirements

2600.

15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

Sometime in late [REDACTED], staff A and resident #1 were involved in a heated verbal exchange during a meal time, which was observed by staff person B. This incident was verbally reported to staff person C and D. However, this allegation of abuse was not reported to the Area Agency on Aging (AAA) until [REDACTED].

Plan of Correction

Accept [REDACTED] - 12/02/2022)

- Staff members C and D are both required to re-take their annual training on Client Rights and Abuse Reporting. Training was assigned to both employees on 11/23/22 and must be completed by 12/9/22 for staff member D and upon return from leave (scheduled for 12/29/22) for staff member C. The Director of Community Residences will be responsible to ensure the training is complete.
- Director of Community Residences will meet with staff members C (On a leave planned return and meeting date 12/29/22) and D (on 12/1/22) individually and document/council on expectations regarding regulation 2600.15.a and the importance of abuse reporting. Supervision for both employees will occur monthly.

Licensee's Proposed Overall Completion Date: 12/09/2022

Implemented [REDACTED] - 01/06/2023)

15b - Supervisor Plan

2. Requirements

2600.

15.b. If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

Description of Violation

Sometime in late [REDACTED], staff A and resident #1 were involved in a heated verbal exchange during a meal time, which was observed by staff person B. This allegation of abuse was verbally reported to staff person C and D. However, staff A was not suspended or placed on a plan of supervision until 10/07/2022.

Plan of Correction

Accept [REDACTED] - 12/02/2022)

- Staff members C and D are both required to re-take their annual training on Client Rights and Abuse Reporting. Training was assigned to both employees on 11/23/22 and must be completed by 12/9/22 for staff member D and upon return from leave (scheduled for 12/29/22) for staff member C. The Director of Community Residences will be responsible to ensure the training is complete.
- Director of Community Residences will meet with staff members C (On a leave planned return and meeting date 12/29/22) and D (on 12/1/22) individually and document/council on expectations regarding regulation 2600.15.b and the importance of implementing a supervision plan to ensure the safety of those we support. Supervision for both employees will occur monthly.

Licensee's Proposed Overall Completion Date: 12/01/2022

15b - Supervisor Plan (continued)

Implemented () - 01/06/2023)

16c - Written Incident Report

3. Requirements

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

Sometime in late (), staff A and resident #1 were involved in a heated verbal exchange during a meal time, which was observed by staff person B. This incident was verbally reported to staff person C and D. However, the home did not report this incident to the department until 10/07/2022.

Plan of Correction

Accept () - 12/02/2022)

- Staff members C and D are both required to re-take their annual training on Client Rights and Abuse Reporting. Training was assigned to both employees on 11/23/22 and must be completed by 12/9/22 for staff member D and upon return from leave (scheduled for 12/29/22) for staff member C. The Director of Community Residences will be responsible to ensure the training is complete.
- Director of Community Residences will meet with staff members C (On a leave planned return and meeting date 12/29/22) and D (on 12/1/22) individually and document/council on expectations regarding regulation 2600.16.c and the importance of reporting abuse allegations to the department within 24 hours of receiving the information. Supervision for both employees will occur monthly.

Licensee's Proposed Overall Completion Date: 12/01/2022

Implemented () - 01/06/2023)

42c - Treatment of Residents

4. Requirements

2600.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

Resident #1 is a picky eater, who often does not like what is offered and requests alternative food items. This happens a lot during breakfast and lunch hours when staff A prepares and serves food. Staff A, whose demeanor is not quite friendly, uses a lot of profanity around co-workers and even residents. Sometime in late (), resident #1 refused to eat what staff A prepared at the resident's request after several back and forths between the table and the kitchen. Staff A threw the food on the plate in a trash can and said to the resident, "I'm not going to make another fucking plate for you."

Plan of Correction

Accept () - 12/02/2022)

- Following report of the allegation, staff A was suspended by the Assistant Director on 10/7/22 pending the outcome of an internal investigation.
- Conclusion of an internal investigation by Woods Services Investigator on 11/4/22 indicated that staff A failed to treat resident #1 with dignity and respect.
- As a result of the internal investigation, staff A is no longer working at Beechwood Center #10.

42c Treatment of Residents (continued)

• To ensure continued education and compliance with resident rights and reporting, the staff will be re trained on client rights and Abuse Reporting. The trainings were assigned by the Director of Community Residences on 12/1/22 and are required to be completed by the staff by 12/9/22. The Director of Community Residences will be responsible to ensure that the staff complete the training. The training will additionally be included in the staff's annual training (assigned by Woods Training Department, monitored by the Personal Care Home Administrator) and required for new hires (included in new hire orientation and monitored by the training department) prior to working in the home.

Licensee's Proposed Overall Completion Date: 12/01/2022

Implemented (█ - 01/06/2023)