

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

March 6, 2023

[REDACTED]
DUNWOODY VILLAGE INC
[REDACTED]
[REDACTED]

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 01/12/2023, 01/13/2023, 01/17/2023 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: *DUNWOODY VILLAGE* License #: *14525* License Expiration: *12/22/2023*
 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: *Labor & Industry*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *87* Waking Staff: *65*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: *01/17/2023*

Inspection Dates and Department Representative

01/12/2023 - Off-Site: [REDACTED]
 01/13/2023 - Off-Site: [REDACTED]
 01/17/2023 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *81* Residents Served: *70*

Secured Dementia Care Unit
 In Home: *Yes* Area: *Memory Unit* Capacity: *20* Residents Served: *17*

Hospice
 Current Residents: *0*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *69*
 Diagnosed with Mental Illness: *3* Diagnosed with Intellectual Disability: *2*
 Have Mobility Need: *17* Have Physical Disability: *0*

Inspections / Reviews

01/12/2023 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *02/03/2023*

Inspections / Reviews (*continued*)

02/03/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 03/02/2023

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 02/08/2023

02/08/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 03/02/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 03/02/2023

03/06/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/02/2023

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 U.S. Department of Health and Human Services ("HHS") issued the Privacy Rule to implement the requirement of the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"). The Privacy Rule standards address the use and disclosure of individuals' health information—called "protected health information". The Privacy Rule protects all "individually identifiable health information" held or transmitted by a covered entity or its business associate, in any form or media, whether electronic, paper, or oral. "Individually identifiable health information" is information, including demographic data, that relates to: the individual's past, present or future physical or mental health or condition, the provision of health care to the individual, or the past, present, or future payment for the provision of health care to the individual, and that identifies the individual or for which there is a reasonable basis to believe it can be used to identify the individual. Individually identifiable health information includes many common identifiers (e.g., name, address, birth date, Social Security Number).

According to staff interviews and documentation submitted to the Department, staff member A, posted on [REDACTED] personal [REDACTED] account about the death of resident 1. The video contained the resident's last name and the cause of death.

Plan of Correction

Accept (MJ - 02/08/2023)

The individual who posted the Tik Tok video is no longer employed by Dunwoody Village. On January 19, 2023, all of the staff participated in staff meetings that were held several times for all three shifts of staff. At these meetings a great deal of time was spent reviewing this incident and the ways that it was a privacy violation and how this also relates to the HIPAA Act of 1996. We reflected on the HIPAA education that was provided to all staff in November, 2022 and discussed that social media of any type and on any platform is not allowed and is a violation of resident's rights. All the staff who attended these meetings understood the impact of such a violation on both the resident and on the organization.

Dunwoody Village regrets that this violation happened. We would never want to subject any resident to any misuse of their information and we self-reported the incident and took immediate action to educate staff. Our focus was to ensure that this employee (or any staff member) would not be able to commit such a violation of rights again and all staff recognized how this was a violation of rights and privacy. The impact on the residents was also part of our Jan. 19th education and staff meetings. We self-reported this incident and took swift action to show that we will uphold the privacy rights for all individuals that we serve and support. Staff at our all shifts meetings had the specific situation of this incident explained and we had interactive dialogue with our staff regarding the specific incident and the use of social media not being allowed by our staff. Our social media policy and other privacy policies were reviewed at these meetings (see enclosed)

The individual who committed this privacy violation was a member of the Recreation Department and this case scenario was discussed at the Recreation Dept. staff meeting and it was explained how this social media use is not allowed by staff members under any circumstances.

Prevention Efforts:

18 - Compliance With Laws (continued)

1. Staff person responsible was removed from [REDACTED] position and employment was terminated.
2. All staff have been educated about the use of social media and privacy rights of the residents at our Jan. 19th staff meetings and also at individual department staff meetings. (This was done by PCA, Director [REDACTED], Director of Nursing, [REDACTED] and Director of Healthcare services, [REDACTED]).
- 3 All new staff orientees (at new hire orientation) will receive education about social media and we will use the scenario of this incident as part of our education for all new staff. ([REDACTED] Employee Development Educator is responsible for this education.)
4. Social Media and Resident Privacy Rights will continue to be part of our annual compliance education. A scenario of this incident will be used for education purposes. (Compliance Coordinator [REDACTED] has put this in place)
5. Staff have been educated on our policies with emphasis being placed on resident privacy and social media use (not being permitted) by any staff member. ([REDACTED] PCA and Recreation Dept. Director [REDACTED] are reviewing the policies with all staff along with [REDACTED] --compliance Coordinator)

This misuse of social Media is part of our education efforts for HIPAA Compliance education planned for March. Also, new hire orientation will have a focus of Social Media not being allowed at Dunwoody Village.

Licensee's Proposed Overall Completion Date: 03/02/2023

Implemented (MJ - 03/06/2023)