

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

June 2, 2023

[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 03/02/2023 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: *03/30/2002* Issued By: *Labor & Industry*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *80* Waking Staff: *60*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: *03/03/2023*

Inspection Dates and Department Representative

03/02/2023 On Site [Redacted]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *81* Residents Served: *65*

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

Hospice
 Current Residents: *1*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *64*
 Diagnosed with Mental Illness: *3* Diagnosed with Intellectual Disability: *2*
 Have Mobility Need: *15* Have Physical Disability: *0*

Inspections / Reviews

03/02/2023 - Partial
 Lead Inspector: [Redacted] Follow-Up Type: *POC Submission* Follow-Up Date: *03/18/2023*

03/22/2023 - POC Submission
 Submitted By: [Redacted] Date Submitted: *06/02/2023*
 Reviewer: [Redacted] Follow-Up Type: *POC Submission* Follow-Up Date: *03/27/2023*

Inspections / Reviews *(continued)*

04/10/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/02/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 04/22/2023

05/22/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/02/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 05/24/2023

06/02/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/02/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 06/04/2023

06/02/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/02/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

15b - Supervisor Plan

1. 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

On [redacted]/23, at [redacted] pm, staff person A was placed on suspension due to an allegation of verbal abuse. Staff person A, returned to work on [redacted]/22. The home did not submit a plan of supervision for staff person A, prior to [redacted] return to work.

Plan of Correction

Accept ([redacted] - 03/22/2023)

A supervision plan and return to work plan were discussed with the COSA-APS representative. However, This was not offered or approved by DHS SE Regional office. Any time a staff member is accused of any type of abuse they will be suspended pending the outcome of an investigation. The suspension had been done by Dunwoody Village and upon conclusion of the investigation the resident was returned to work with a plan of supervision. The plan was that this staff member would not work alone, until they received counseling and education about treating residents with dignity and respect. In the future a plan of supervision will be submitted to DHS regarding the resident's return to work. Education for all staff will take place during our next training cycle. this will be on treating all residents with respect, dignity and kindness.

Dunwoody Village has been doing program development incorporating the Montessori philosophy. This is a specially designed program for older adults who experience a cognitive decline. We will incorporate our Montessori philosophy into our staff education, which respects personal choice and encourages independence.

Licensee's Proposed Overall Completion Date: 04/21/2023

Implemented ([redacted] - 05/22/2023)

23a - Activities of Daily Living Assistance

2. Requirements

2600.

23.a. A home shall provide each resident with assistance with ADLs as indicated in the resident's assessment and support plan.

Description of Violation

The assessment and support plan, dated [redacted]/22, for resident #1 indicates the resident requires assistance [redacted] [redacted] requires supervision in the home. On [redacted]/23, the resident did not receive this assistance as required. Staff person B, was assigned to resident #1. Staff person B, was unable to account for the whereabouts of resident #1 and/or any incident of the resident being yelled and told ; "GO TO YOUR ROOM!"

Plan of Correction

Accept ([redacted] - 04/10/2023)

Resident Assessment and Support Plan for resident #1 was updated on [redacted] 2023 to include the need for additional supervision, need of assistive devices and level of assistance needed; including, [redacted] other assistive devices needed by Resident #1. A one-page care card called, "At-a-Glance" was created for resident #1 and will be kept in a binder at the nursing station on the unit. The At-a-Glance card includes a list of all assistive devices that resident #1 utilizes and the level of assistance that resident #1 needs from staff to properly use, store and care for each device. An audit of all personal care residents' Resident Assessment

23a - Activities of Daily Living Assistance (continued)

and Support Plans was conducted and all will be updated by April 7, 2023; to include needs for supervision, needs for assistive devices and level of assistance needed; including, hearing devices, vision aids, use of dentures or other assistive devices needed for resident. A one-page care card called, "At-a-Glance" was created for each resident and will be kept in a binder at the nursing station on the unit. The At-a-Glance card includes a list of all assistive devices that each resident utilizes and the level of assistance that each resident needs from staff to properly use, store and care for each device. All resident RASPs will be updated and all residents will have a one-page At-a-Glance that reflects their needs; which will be kept in a binder at the respective unit nurse stations. Nurse aides will rotate assignments quarterly so that all nurse aides get to know all residents and their care needs.

Licensee's Proposed Overall Completion Date: 04/10/2023

Implemented () - 05/22/2023)

42c - Treatment of Residents

3. Requirements

2600.

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

Description of Violation

A family member witnessed an unidentified worker speak to resident #1 in a harsh and loud tone. The worker was heard telling the resident, " GO TO YOUR ROOM!" The witness of this incident reports, the tone was harsh and lacked respect due to the yelling in the hallway at resident #1 from a distance.

Plan of Correction

Accept () - 04/10/2023)

Counseling and reeducation for employees who were present at the time of the allegation of abuse will be completed by April 7, 2023; to include: abuse and neglect, abuse and neglect reporting requirements, resident dignity and respect. All staff will be reeducated on these topics by April 7, 2023.

Licensee's Proposed Overall Completion Date: 04/10/2023

Implemented () - 06/02/2023)

234d - Support Plan Revision

4. 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 5/18/22; however, resident #1 is hard of hearing and no longer utilizes the assisted hearing devices also resident #1 has been known to [REDACTED] The resident's support plan has not been revised to reflect this change.

Plan of Correction

Accept () - 03/22/2023)

Personal Care staff are auditing the RASPs of all residents to ensure we are up to date with all of the care needs. Also, unit nurses will be educated to document on the care plans as care needs change. All staff are responsible for documenting new assistive devices, new care procedures and any changes of significance for each resident. The

234d - Support Plan Revision (continued)

individual resident who was involved in this incident had her care plan updated right away after it was pointed out to not have pertinent and necessary information on the care plan. All residents routinely have care plan meetings at least twice per year involving the resident's support system. Updates are to occur whenever anything changes.

Licensee's Proposed Overall Completion Date: 04/21/2023

Implemented (█ - 06/02/2023)