

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

October 30, 2023

[REDACTED]
WOODS SERVICES, INC.
[REDACTED]
[REDACTED]

RE: BEECHWOOD CENTER 1
585 BEECHWOOD CIRCLE
LANGHORNE, PA, 19047
LICENSE/COC#: 12677

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/19/2023 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: *BEECHWOOD CENTER 1* License #: *12677* License Expiration: *11/01/2023*
 Address: *585 BEECHWOOD CIRCLE, LANGHORNE, PA 19047*
 County: *BUCKS* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *WOODS SERVICES, INC.*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-1* Date: *08/31/1984* Issued By: *Pennsylvania Dept. of Health*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *13* Waking Staff: *10*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal* Exit Conference Date: *09/19/2023*

Inspection Dates and Department Representative

09/19/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *8* Residents Served: *7*

Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *7* Are 60 Years of Age or Older: *4*
 Diagnosed with Mental Illness: *7* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *6* Have Physical Disability: *3*

Inspections / Reviews

09/19/2023 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/14/2023*

10/10/2023 - POC Submission

Submitted By: [REDACTED] Date Submitted: *10/19/2023*
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *10/20/2023*

Inspections / Reviews *(continued)*

10/30/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/19/2023

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

62 - Contact List

1. Requirements

2600.

62. List of Staff Persons - The administrator shall maintain a current list of the names, addresses and telephone numbers of staff persons including substitute personnel and volunteers.

Description of Violation

The nursing staff, including staff person A, which serves the home is not included in the staff list provided on 9/19/2023.

Plan of Correction

Accept [redacted] - 10/10/2023)

The staff list will be updated by the Personal Care Home Administrator by 10/20/23 to include all staff working within Beechwood Center 1. The list will additionally be maintained by the Administrator as new hires are added or employees leave. A quarterly review of the list will be completed by the Director of Community Residences during supervision with the Administrator starting 1/1/24.

Licensee's Proposed Overall Completion Date: 10/20/2023

Implemented ([redacted] - 10/30/2023)