

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

May 9, 2024

[REDACTED]
COUNTRY MEADOWS OF WYOMISSING LLC
[REDACTED]

RE: COUNTRY MEADOWS OF
WYOMISSING II
1802 TULPEHOCKEN ROAD
WYOMISSING, PA, 19610
LICENSE/COC#: 20504

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/20/2024 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: COUNTRY MEADOWS OF WYOMISSING II License #: 20504 License Expiration: 03/26/2025
 Address: 1802 TULPEHOCKEN ROAD, WYOMISSING, PA 19610
 County: BERKS Region: NORTHEAST

Administrator

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

Legal Entity

Name: COUNTRY MEADOWS OF WYOMISSING LLC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 03/04/1997 Issued By: L & I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 145 Waking Staff: 109

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Incident Exit Conference Date: 03/20/2024

Inspection Dates and Department Representative

03/20/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 166 Residents Served: 106

Secured Dementia Care Unit
 In Home: Yes Area: SCDU Capacity: 60 Residents Served: 39

Hospice
 Current Residents: 12

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 106
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 39 Have Physical Disability: 0

Inspections / Reviews

03/20/2024 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 05/02/2024

05/07/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 05/08/2024
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 05/09/2024

Inspections / Reviews (*continued*)

05/09/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/08/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

42c - Treatment of Residents

1. Requirements

2600.

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

Description of Violation

On [redacted] Resident [redacted] was feeling discomfort in [redacted] back and yelled out in pain while Staff Person A was attempting to assist the resident to get out of bed during morning care. Staff person B witnessed Staff Person A telling the resident [redacted] "You're being a coward. you are a [redacted] not a [redacted]" in response to the resident's cries of pain.

Plan of Correction

Accept [redacted] - 05/07/2024)

- On [redacted], Staff Person B immediately reported the witnessed event to the Director of Nursing.
- Upon notification, Staff Person A was suspended from work and left campus on 3/8/2024 pending investigation.
- Resident [redacted] was immediately assessed to ensure no ill effect from incident and that complaints of pain was addressed.
- On [redacted] Policy and Procedures related to Mandatory Abuse Reporting were initiated and all parties notified of incident, including but not limited to completion of Act 13 Form to Area Agency on Aging.
- [redacted], investigation concluded and confirmed actions of abuse resulting in immediate termination of Staff Person A.
- Executive Director of Memory Support Services for Country Meadows conducted multiple in-person training sessions from [redacted] on Managing Residents with Difficult Behaviors. The training focused on providing coworkers techniques for working with those with a cognitive impairment. Topics discussed also included understanding forms of resident abuse and person-centered care. Please see attached sign-in sheets for attendance.
- Mandatory Resident Abuse Reporting continues to be trained within first 40 hours of new employment and annually. Executive Director will ensure compliance by monitoring newly hired coworker files and annual training requirements.
- Ongoing compliance will be reviewed by the Campus ED and DON, with Quality Management Plan.

Licensee's Proposed Overall Completion Date: 04/29/2024

Implemented [redacted] - 05/09/2024)

182b - Prescription Medication

2. Requirements

2600.

182.b. Prescription medication that is not self-administered by a resident shall be administered by one of the following:

Description of Violation

Resident [redacted] has a prescription for [redacted] tablets and [redacted] tablets to be taken at 8pm. The home administered this medication as scheduled however later discovered the medication was also administered to Resident [redacted] by Resident [redacted] as the resident had extra medication in their room. Resident [redacted] is not assessed to administer medications to resident [redacted].

Plan of Correction

Accept [redacted] - 05/07/2024)

- On [redacted] Resident [redacted] and Resident [redacted], a couple, were newly admitted to Country Meadows of Wyomissing. Both Resident [redacted] and Resident [redacted] were living independently in their family home prior to admission. Resident [redacted] was managing the medication of Resident [redacted] up until admission.
- Upon notification of this medication administration the nurse followed the Medication Error Policy and Procedure

182b - Prescription Medication (continued)

that included notification of Resident [REDACTED] and Resident [REDACTED] Responsible Party. The Responsible Party was unaware that Resident [REDACTED] had brought any medications with them upon admission and removed the medications on 3/20/24 from Resident [REDACTED] and Resident [REDACTED] apartment.

- Effective, 3/20/24, Medications will continue to only be administered by those authorized as noted in regulation 2600.182.b.
- Effective 4/22/24, to ensure ongoing compliance, education on community's medication administration policies will be provided to all residents prior to admission as noted in Resident Agreement. Resident's signature to Resident Agreement will serve as acknowledgement to this policy. Furthermore, medications will continue to be reviewed with resident and/or responsible party by nurse at time of admission.

Licensee's Proposed Overall Completion Date: 04/29/2024

Implemented [REDACTED] - 05/09/2024)

202 - Prohibitions**3. Requirements**

2600.

202. The following procedures are prohibited:

6. A manual restraint, defined as a hands-on physical means that restricts, immobilizes or reduces a resident's ability to move his arms, legs, head or other body parts freely, is prohibited. A manual restraint does not include prompting, escorting or guiding a resident to assist in the ADLs or IADLs.

Description of Violation

On the morning of [REDACTED] Staff Person A and Staff Person B were providing morning care to resident [REDACTED] who became resistant to care. Staff Person A was witnessed by Staff Person B putting Resident [REDACTED] arms behind their back, putting the resident on their stomach and holding their hands behind their back while completing morning care. Upon standing Resident [REDACTED] up to complete the rest of morning care, Staff Person A was seen by Staff Person B holding Resident [REDACTED]s hand to [REDACTED] chest when the resident became resistant to care.

Plan of Correction

Accept [REDACTED] - 05/07/2024)

- On [REDACTED], Staff Person B immediately reported the witnessed event to the Director of Nursing.
- Upon notification on [REDACTED] Staff Person A was suspended from work and left campus on [REDACTED] pending investigation.
- Resident [REDACTED] was immediately assessed on [REDACTED] to ensure no ill effect or injury was sustained from incident.
- Policy and Procedures related to Mandatory Abuse Reporting were initiated and all parties notified of incident, including but not limited to completion of Act 13 Form to Area Agency on Aging on 3/8/24
- 3/9/2024, investigation concluded and confirmed actions of abuse resulting in immediate termination of Staff Person A.
- Executive Director of Memory Support Services for Country Meadows conducted multiple in-person training sessions from 3/13/24-3/18/24 on Managing Residents with Difficult Behaviors. The training focused on providing coworkers techniques for working with those with a cognitive impairment. Topics discussed also included understanding forms of resident abuse and person-centered care. Please see attached sign-in sheets for attendance.
- Mandatory Resident Abuse Reporting continues to be trained within first 40 hours of new employment and annually as of 3/8/24 and ongoing.
- Executive Director will ensure compliance by monitoring newly hired coworker files and annual training requirements.
- Ongoing compliance will be reviewed by the Campus ED with the Quality Management Plan.

202 - Prohibitions (continued)

Licensee's Proposed Overall Completion Date: 04/29/2024

Implemented (█) - 05/09/2024