

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

April 29, 2024

[REDACTED]
HUMANGOOD PENNSYLVANIA
[REDACTED]

RE: RYDAL PARK PERSONAL CARE
1515 THE FAIRWAY
RYDAL, PA, 19046
LICENSE/COC#: 13812

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/02/2024 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: *RYDAL PARK PERSONAL CARE* License #: *13812* License Expiration: *02/19/2025*
Address: *1515 THE FAIRWAY, RYDAL, PA 19046*
County: *MONTGOMERY* Region: *SOUTHEAST*

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: *HUMANGOOD PENNSYLVANIA*
Address: [Redacted]
Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *70* Waking Staff: *53*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Complaint* Exit Conference Date: *04/02/2024*

Inspection Dates and Department Representative

04/02/2024 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

| | | | |
|--|--|---------------------|-----------------------------|
| General Information | | | |
| License Capacity: <i>72</i> | Residents Served: <i>47</i> | | |
| Secured Dementia Care Unit | | | |
| In Home: <i>Yes</i> | Area: <i>Memory Support</i> | Capacity: <i>22</i> | Residents Served: <i>16</i> |
| Hospice | | | |
| Current Residents: <i>0</i> | | | |
| Number of Residents Who: | | | |
| Receive Supplemental Security Income: <i>0</i> | Are 60 Years of Age or Older: <i>47</i> | | |
| Diagnosed with Mental Illness: <i>0</i> | Diagnosed with Intellectual Disability: <i>0</i> | | |
| Have Mobility Need: <i>23</i> | Have Physical Disability: <i>0</i> | | |

Inspections / Reviews

04/02/2024 - Partial
Lead Inspector: [Redacted] Follow-Up Type: *POC Submission* Follow-Up Date: *04/19/2024*

Inspections / Reviews (*continued*)

04/29/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/29/2024

Reviewer: [REDACTED]

Follow-Up Type: *Bypass Document
Submission*

04/29/2024 - Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/29/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

16c - Written Incident Report

1. 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

On [redacted], Resident [redacted] did not receive morning medications, which included [redacted] [redacted], [redacted], [redacted] and [redacted]. The home did not submit an incident report to the Department.

On [redacted] at [redacted] Resident [redacted] did not receive [redacted] as prescribed. The home did not submit an incident report to the Department.

Plan of Correction

Accept [redacted] - 04/29/2024)

Preparation and execution of this Response and Plan of Correction does not constitute an admission or agreement by HumanGood/Rydal Park Personal Care Facility of the truth of the facts alleged or conclusions set forth in the Statement of Deficiencies and Plan of Correction. The Plan of Correction is being prepared and/or executed solely because it is required by State and Federal Law. For the purposes of any allegation that the facility is not in substantial compliance with Federal requirements of participation, the Response and Plan of Correction constitutes the facility’s allegation of compliance in accordance with section 2600.3 (c) of the Regulatory Compliance Guide.

LPN’s and medication technicians has been educated on the reporting requirements of regulation 16c by the administrator on 04/16/2024- see attached in service.

Electronic health record system has been upgraded by Personal to include indicator for missing medication administration on 04/03/2024.

Administrator or Personal care nurse will conduct daily audits of medication administration report for the next 3 months starting on 4/16/2024 and ending on 7/16/2024. Audits will be reported to QAPI monthly starting May 2024.

Licensee's Proposed Overall Completion Date: 04/19/2024

Implemented [redacted] 04/29/2024)

65b - Rights/Abuse 40 Hours

2. Requirements

2600.

65.b. Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following:

- 2. Emergency medical plan.
- 4. Reporting of reportable incidents and conditions.

Description of Violation

Staff Person B completed [redacted] 40th scheduled work hour on or around [redacted]. However, this staff person did not complete training in the following topics until [redacted]: emergency medical plan and reporting of reportable incidents and conditions.

65b - Rights/Abuse 40 Hours (continued)

Plan of Correction

Accept [REDACTED] - 04/29/2024)

The Human Resources Director and Personal Care Home Administrator were in-serviced on this regulation 65b on 04/16/2024 by Executive Director- see attached in service.

Administrator and Human Resources will provide training for all new staff persons within 40 scheduled working hours. Human Resource Director will audit Personal Care Home new staff persons files as it relates to new hire orientation being with the first 40 scheduled hours monthly for 12 months, and report to QAPI monthly starting May 2024.

Licensee's Proposed Overall Completion Date: 04/19/2024

Implemented [REDACTED] - 04/29/2024)

183d - Prescription Current

6. Requirements

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

On [REDACTED], prescribed for Resident [REDACTED] was in the home's medication cart; however, the medication was not current.

Plan of Correction

Accept [REDACTED] 04/29/2024)

It was identified during survey that the medication order was not transcribed to the community's EMAR system that went live on 4/1/2024. Medication order was an active order. The order was entered into the new EMAR system as prescribed on 04/02/2024.

A complete review and verification of residents' orders was done on 04/08/2024 by administrator and Personal Care nurse.

Inservice provided to LPN's and medication technicians- see attached in service. LPNs were educated on accurate transcription of physician orders and regulation 183d on 04/16/2024 by administrator.

Moving forward, The Personal Care Nurse will be conducting weekly medication cart audits for 12 months starting April 2024, and findings will be reported monthly to QAPI starting in May 2024.

Licensee's Proposed Overall Completion Date: 04/19/2024

Implemented [REDACTED] - 04/29/2024)

185a - Implement Storage Procedures

7. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident [REDACTED] is prescribed [REDACTED] and [REDACTED] as needed.

On 4/2/24, these medications were not available in the home.

185a - Implement Storage Procedures (continued)

Resident [REDACTED] is prescribed Simethicone as needed. On [REDACTED] this medication was not available in the home.

Plan of Correction

Accept [REDACTED] - 04/29/2024)

Resident [REDACTED] - medication was reordered at resident's preferred pharmacy and received on 4/3/24.
Resident [REDACTED] - POA made aware of medication needed. POA brought in medication on 4/3/24 to the community. Medication audit of all resident's availability of medication routine and PRN was completed by the Personal Care Nurse on 4/15/24.
Inservice provided to LPN's and medication technicians on reordering of medications as well as regulation 185a on 04/16/2024 by administrator - see attached in service.
Moving forward, The Personal Care Nurse will be conducting weekly medication cart audits for 12 months starting April 2024, and findings will be reported monthly to QAPI starting in May 2024.

Licensee's Proposed Overall Completion Date: 04/19/2024

Implemented [REDACTED] - 04/29/2024)

187c - Refusal of Medication

8. Requirements

2600.

187.c. If a resident refuses to take a prescribed medication, the refusal shall be documented in the resident's record and on the medication record. The refusal shall be reported to the prescriber within 24 hours, unless otherwise instructed by the prescriber. Subsequent refusals to take a prescribed medication shall be reported as required by the prescriber.

Description of Violation

On [REDACTED] at [REDACTED], Resident [REDACTED] refused to take a scheduled dose of [REDACTED]. The home did not report the refusal to the resident's doctor as required.

Plan of Correction

Accept [REDACTED] - 04/29/2024)

The Personal Care Administrator spoke with Primary Care Physicians (PCPs) in the community and informed them that nurses would call to report medication refusals. PCPs expressed a preference not to be notified after each refusal unless the resident was significantly affected by the refusal. An order was obtained stating that the PCP should be notified after three days, and any noted adverse effects should be reported. See attached PCP order.
An inservice was provided to LPNs and medication technicians on the topic of medication refusal 187c on 04/16/2024 by administrator. Please see the attached inservice.
Moving forward, the administrator or Personal care nurse will conduct daily audits of the medication administration report for 3 months; from April 16, 2024, through July 16, 2024. These audits will be reported to QAPI monthly starting May 2024.

Licensee's Proposed Overall Completion Date: 04/19/2024

Implemented [REDACTED] - 04/29/2024)

187d - Follow Prescriber's Orders

9. Requirements

187d - Follow Prescriber's Orders (continued)

2600.
187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident [redacted] is prescribed [redacted], [redacted], [redacted], [redacted], and [redacted]. However, these medication were not administered to Resident [redacted] in the morning on 3/27/24.

Resident [redacted] is prescribed [redacted] tablet three times daily for 14 days starting [redacted]. However, this medication was not administered to Resident [redacted] on [redacted] because the medication was not available in the home.

Resident [redacted] is prescribed [redacted], [redacted], [redacted], and [redacted]. On [redacted], [redacted] was not administered to Resident [redacted] at [redacted] and [redacted], and [redacted], and Docusate Sodium, were not administered in the evening.

Plan of Correction

Accept [redacted] (04/29/2024)

Inservice provided to LPN's and medication technicians on missed/skipped medications, regulation 187d- on 04/16/2024 by administrator- see attached in service.

Moving forward, the administrator or Personal care nurse will conduct daily audits review of medication administration report beginning on 4/16/2024 through 7/16/2024. Audits will be reported to QAPI monthly starting May 2024

Licensee's Proposed Overall Completion Date: 04/19/2024

Implemented [redacted] - 04/29/2024)

188b - Medication Error Reporting

10. Requirements

2600.
188.b. A medication error shall be immediately reported to the resident, the resident's designated person and the prescriber.

Description of Violation

Resident [redacted] is prescribed [redacted], [redacted], [redacted], [redacted], and [redacted]. However, these medications were not administered to Resident [redacted] in the morning on [redacted]. The medication errors were not immediately reported to the resident, resident's designated person or prescriber.

Resident [redacted] is prescribed [redacted] tablet three times daily for 14 days starting 3/28/24. However, this medication was not administered to resident [redacted] on [redacted] because the medication was not available in the home. The medication error was not reported to the resident, resident's designated person, and prescriber.

Plan of Correction

Accept [redacted] - 04/29/2024)

Inservice provided to LPN's and medication technicians on missed/skipped medications, regulation 187d- 04/16/2024 by the administrator- see attached in service.

Moving forward, the administrator or Personal care nurse will conduct daily audits review of medication administration report beginning on 4/16/2024 through 7/16/2024. Audits will be reported to QAPI monthly

188b - Medication Error Reporting (continued)*starting May 2024*

Licensee's Proposed Overall Completion Date: 04/19/2024

*Implemented [REDACTED] - 04/29/2024)***227d - Support Plan Medical/Dental****11. Requirements**

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

Resident 2 has a need for 2 bedside mobility devices to transfer in and out of bed. The resident's support plan, dated 9/19/23, does not mention the bedside mobility devices. The support plan also does not address the resident's frequent falls. On the support plan the resident's judgement is assessed as "A," however the resident needs a walker and chooses not to use it, despite the resident's frequent falls. There is no plan to address the resident's lack of judgement.

Plan of Correction**Accept (GE - 04/29/2024)**

Personal Care Home Administrator was in-serviced on this regulation 227d on 04/16/2024 by Executive Director- see attached in service.

Resident [REDACTED] support plan updated to address use of mobility devices as well as reassessed judgment related to falls on 04/04/2024 by the administrator.

Administrator reviewed all residents support plans to ensure all support plans are appropriate and reflect accurate/updated information on 04/15/2024.

Moving forward, administrator and Personal care nurse will conduct monthly audits on support plans for the next 6 months starting in April 2024 to October 2024, findings will be reported monthly to QAPI starting in May 2024.

Licensee's Proposed Overall Completion Date: 04/19/2024

Implemented [REDACTED] 04/29/2024)