

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

June 7, 2024

[REDACTED], ADMINISTRATOR
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 04/11/2024 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: DUNWOODY VILLAGE **License #:** 14525 **License Expiration:** 12/22/2024
Address: 3500 WEST CHESTER PIKE, NEWTOWN SQUARE, PA 19073
County: DELAWARE **Region:** SOUTHEAST

Administrator

Name: [REDACTED] **Phone:** [REDACTED]

Legal Entity

Name: DUNWOODY VILLAGE INC
Address: 3500 WEST CHESTER PIKE, ATTN:PERSONAL CARE SERVICES, NEWTOWN SQUARE, PA, 19073
Phone: 6103594400 **Email:** sneidich@DUNWOODY.ORG

Certificate(s) of Occupancy

Type: C-1 **Date:** 01/30/2002 **Issued By:** Dept of Licenses & Inspections

Staffing Hours

Resident Support Staff: **Total Daily Staff:** 91 **Waking Staff:** 68

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident **Exit Conference Date:** 04/11/2024

Inspection Dates and Department Representative

04/11/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 81 **Residents Served:** 69

Secured Dementia Care Unit

In Home: Yes **Area:** Cedars West **Capacity:** 20 **Residents Served:** 15

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 68
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 2
Have Mobility Need: 22 **Have Physical Disability:** 11

Inspections / Reviews

04/11/2024 Partial

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

06/06/2024 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 04/26/2024
Reviewer: [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 05/20/2024

Inspections / Reviews *(continued)*

06/07/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/06/2024

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], at [REDACTED] there was an allegation by Resident 1 that Staff Person A was rough with [REDACTED] while assisting resident to sit up in bed to take [REDACTED] medication, it was reported that Staff Person A "yanked" [REDACTED] arms. The home did not report this incident to the department until [REDACTED]

Plan of Correction

Accept [REDACTED] - 04/29/2024)

- 1. Effective 4/27/24 all staff in support departments for PC will begin being educated on abuse reporting including activities, housekeeping, maintenance and dietary with completion by 5/15/24.
- 2. Beginning 5/15/25 All staff from auxiliary departments including activities, housekeeping, maintenance and dietary that work on any PC neighborhood will sign off daily for the next 45-days if they suspect abuse and if so, has it been reported.
- 3. Staff from PC auxiliary departments including activities, housekeeping, maintenance and dietary will be inserviced on the requirement to sign off daily for the next 45-days if they suspect abuse and if so, if it has been reported beginning 4/26/24. Inservicing will be completed by 5/15/24.
- 4. PCHA, Nurse Manager or designee will audit daily to ensure auxiliary staff has signed off or reported daily beginning 5/15/24

Licensee's Proposed Overall Completion Date: 05/15/2024

Implemented ([REDACTED] - 06/07/2024)

141b1 Annual Medical Evaluation

2. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident 1's most recent medical evaluation was completed on [REDACTED] The resident's previous medical evaluation was completed on [REDACTED].

Plan of Correction

Accept [REDACTED] - 04/29/2024)

- 1. All PC nurses will be inserviced beginning on 4/26/24 on the requirements of 141b1 and the requirements of a resident having a medical evaluation at least annually. Inservicing will be completed by 5/15/24.
- 2. A full house audit will be completed of resident's last DME and the required date of the next DME by 5/1/24.
- 3. A tickler log will be developed by 5/1/24 and maintained at all times with updated dates of DME's due. This log will be audited to ensure it is kept updated by PCHA for the next 60 days.

Licensee's Proposed Overall Completion Date: 05/15/2024

Implemented ([REDACTED] 06/07/2024)