

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

August 15, 2024

[REDACTED], DIRECTOR
WOODS SERVICES, INC.

RE: BEECHWOOD CENTER 6
166 BRENDWOOD DRIVE
LANGHORNE, PA, 19047
LICENSE/COC#: 12968

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/18/2024 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: BEECHWOOD CENTER 6 License #: 12968 License Expiration: 11/01/2024
Address: 166 BRENDWOOD DRIVE, LANGHORNE, PA 19047
County: BUCKS Region: SOUTHEAST

Administrator

Name: [REDACTED]

Legal Entity

Name: WOODS SERVICES, INC.
Address: [REDACTED]

Certificate(s) of Occupancy

Type: C-3 SP Date: 05/17/1995 Issued By: Commonwealth of PA L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 5 Waking Staff: 4

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint, Incident Exit Conference Date: 06/18/2024

Inspection Dates and Department Representative

06/18/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 5 Residents Served: 5

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

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

Inspections / Reviews

06/18/2024 Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 07/13/2024

07/19/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: 08/14/2024
Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 07/24/2024

Inspections / Reviews *(continued)*

07/30/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 08/14/2024

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 08/13/2024

08/14/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/14/2024

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 08/16/2024

08/15/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/14/2024

Reviewer: [REDACTED]

Follow Up Type: Not Required

201 - Positive Interventions

1. Requirements

2600.

201. Safe Management Techniques - The home shall use positive interventions to modify or eliminate a behavior that endangers the resident himself or others. Positive interventions include improving communications, reinforcing appropriate behavior, redirection, conflict resolution, violence prevention, praise, deescalation techniques and alternative techniques or methods to identify and defuse potential emergency situations.

Description of Violation

Resident 1's current assessment and support plan, dated [REDACTED] indicate that they tend to get irritated with housemates and sometimes need assistance with decision-making due to impulsiveness. The support plan further states that staff will help Resident 1 avoid becoming upset and redirect them when necessary. Staff will also attempt to identify triggers that upset Resident 1 and help them avoid making poor decisions. However, on 06/10/2024 at 11:30 AM, Staff person A did not utilize these safe management techniques or positive interventions when Resident 1 refused to fill out an LOA form upon returning from their three-day weekend, claiming it had already been completed by another staff member. Instead, Staff person A escalated the situation by persisting that Resident 1 complete the LOA form. They started yelling at each other, and the argument became heated and Resident 1 ran toward Staff person A, who was in the office doorway. Staff person A tried to close the office door to prevent Resident 1 from entering, but in the process, Staff person A's arm pushed against Resident 1's upper arm, and Resident 1's toes got caught beneath the door, potentially endangering their safety.

Plan of Correction

Accept ([REDACTED] - 07/30/2024)

Following completion of an internal investigation on [REDACTED] and Administrative Review Committee on [REDACTED], it was concluded that Staff A was in need of training and education on Support Plans, and de-escalation techniques. The Director of Community Residences met with staff A on [REDACTED]. During this meeting, Staff A was issued a memo outlining the conclusion of the investigation and expectations in the future. Staff A was assigned trainings (outlined in the memo) and is expected to attend all trainings in response to the noted concerns by [REDACTED]. Staff are trained in Support Plans upon hire by the Personal Care Home Administrator and annually or following any changes in the plans thereafter by the Personal Care Home Administrator. The Director of Community Residences will be retraining all of the staff in the home on resident support needs by [REDACTED]

Licensee's Proposed Overall Completion Date: 08/02/2024

Implemented ([REDACTED] - 08/15/2024)