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

September 6, 2024

[redacted], ED
RAPPS SENIOR CARE LLC
[redacted]

RE: WOODBRIDGE PLACE
1191 RAPPS DAM ROAD
PHOENIXVILLE, PA, 19460
LICENSE/COC#: 14359

Dear [redacted],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/16/2024 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: *WOODBRIDGE PLACE* **License #**: *14359* **License Expiration**: *12/21/2024*

Address: *1191 RAPPS DAM ROAD, PHOENIXVILLE, PA 19460*

County: *CHESTER* **Region**: *SOUTHEAST*

Administrator

Name: [redacted] **Phone**: [redacted] **Email**: [redacted]

Legal Entity

Name: *RAPPS SENIOR CARE LLC*

Address: [redacted]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: **Total Daily Staff**: *92* **Waking Staff**: *69*

Inspection Information

Type: *Partial* **Notice**: *Unannounced* **BHA Docket #**:

Reason: *Complaint, Incident* **Exit Conference Date**: *07/17/2024*

Inspection Dates and Department Representative

07/16/2024 - On-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *125* **Residents Served**: *67*

Secured Dementia Care Unit

In Home: *Yes* **Area**: *Bridges* **Capacity**: *21* **Residents Served**: *14*

Hospice

Current Residents: *6*

Number of Residents Who:

Receive Supplemental Security Income: *0* **Are 60 Years of Age or Older**: *67*

Diagnosed with Mental Illness: *0* **Diagnosed with Intellectual Disability**: *0*

Have Mobility Need: *25* **Have Physical Disability**: *0*

Inspections / Reviews

07/16/2024 Partial

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *08/23/2024*

08/27/2024 - POC Submission

Submitted By: [redacted] **Date Submitted**: *09/06/2024*

Reviewer: [redacted] **Follow-Up Type**: *Document Submission* **Follow-Up Date**: *09/06/2024*

Inspections / Reviews *(continued)*

09/06/2024 Document Submission

Submitted By: [redacted] **Date Submitted:** *09/06/2024*

Reviewer: [redacted] **Follow Up Type:** *Not Required*

15c - Supervision

1. Requirements

2600.
15.c. The home shall immediately submit to the Department's personal care home regional office a plan of supervision or notice of suspension of the affected staff person.

Description of Violation

On [redacted] there was an alleged abuse between care staff, A and resident #1. Care staff A was immediately suspended and returned to work with residents on [redacted] without an approved supervision plan by the Department.

Plan of Correction ***Accept ([redacted] - 08/27/2024)***

Description of Violation- On [redacted] there was an alleged abuse between care staff, A and resident #1. Care staff A was immediately suspended and returned to work with residents on [redacted] without an approved supervision plan by the Department.

• Staff member was terminated on [redacted] after DHS completed investigation.

• The Executive Director will complete education with all Department Managers, on submitting a notice to DHS when a staff member is suspended, as well as submitting a request for approval if a staff member is to return to work. Education will be completed by 9/5/24

Licensee's Proposed Overall Completion Date: *09/05/2024*

Implemented ([redacted] - 09/06/2024)

42b - Abuse

2. Requirements

2600.
42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

According to caregiver A, on [redacted], resident #1 yelled when they slapped his/her hand during care to prevent the resident from touching a soiled brief. Caregiver B heard the skin-to-skin slap during care by caregiver A and then heard the reside immediately yell. Caregiver B observed the resident's behavior when they came out of the room, following caregiver A's mistreatment. The resident appeared scared and flinched when touched during care.

Repeat violation: 8/14/2023

Plan of Correction ***Accept ([redacted] - 08/27/2024)***

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation- According to caregiver A, on [redacted], resident #1 yelled when they slapped his/her hand during care to prevent the resident from touching a soiled brief. Caregiver B heard the skin-to-skin slap during care by caregiver A and then heard the reside immediately yell. Caregiver B observed the resident's behavior when they came out of the room, following caregiver A's mistreatment. The resident appeared scared and flinched when touched during care.

• Staff member was suspended. After DHS came to investigate staff member was terminated from employment.

42b Abuse (continued)

• Director of Wellness will complete education to care staff on abuse, neglect, and resident rights by 9/5/24

• Director of Wellness will provide education to care staff on proper techniques for handling behaviors with residents that have Dementia by 9/5/24

• Director of Wellness will continue conduct education on abuse during monthly staff meetings for the next 6 months, and ongoing as needed.

Licensee's Proposed Overall Completion Date: *09/05/2024*

Implemented ([redacted] 09/06/2024)