

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

October 16, 2024

[REDACTED]  
WYNDMOOR ASSISTED LIVING COMPANY LLC  
[REDACTED]

RE: SPRINGFIELD SENIOR LIVING  
COMMUNITY  
551 EAST EVERGREEN AVENUE  
WYNDMOOR, PA, 19038  
LICENSE/COC#: 14484

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/20/2024 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: *SPRINGFIELD SENIOR LIVING COMMUNITY* License #: *14484* License Expiration: *05/12/2025*  
 Address: *551 EAST EVERGREEN AVENUE, WYNDMOOR, PA 19038*  
 County: *MONTGOMERY* Region: *SOUTHEAST*

**Administrator**

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

**Legal Entity**

Name: *WYNDMOOR ASSISTED LIVING COMPANY LLC*  
 Address: [Redacted]  
 Phone: [Redacted] Email: [Redacted]

**Certificate(s) of Occupancy**

Type: *C 2 LP* Date: *11/16/1987* Issued By: *PA L & I*

**Staffing Hours**

Resident Support Staff: Total Daily Staff: *76* Waking Staff: *57*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Monitoring* Exit Conference Date: *08/20/2024*

**Inspection Dates and Department Representative**

*08/20/2024 On Site* [Redacted]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *103* Residents Served: *56*

**Special Care Unit**  
 In Home: *Yes* Area: *3rd floor* Capacity: *34* Residents Served: *10*

**Hospice**  
 Current Residents: *2*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *10* Are 60 Years of Age or Older: *56*  
 Diagnosed with Mental Illness: *10* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *20* Have Physical Disability: *1*

**Inspections / Reviews**

**08/20/2024 - Partial**  
 Lead Inspector: [Redacted] Follow-Up Type: *POC Submission* Follow-Up Date: *09/15/2024*

**09/25/2024 - POC Submission**  
 Submitted By: [Redacted] Date Submitted: *10/11/2024*  
 Reviewer: [Redacted] Follow-Up Type: *POC Submission* Follow-Up Date: *09/30/2024*

Inspections / Reviews *(continued)*

10/04/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/11/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 10/11/2024

10/16/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/11/2024

Reviewer: [REDACTED]

Follow-Up Type: Not Required

42c Dignity/Respect

1. Requirements

2800.  
42.c. A resident shall be treated with dignity and respect.

Description of Violation

Staff person A told resident [redacted] that resident [redacted] "talks too much."

Additionally, unnamed staff have said the following to resident [redacted]:

- "nobody wants to work with you"
- have called resident [redacted] "a piece of work", and,
- "Jesus Christ, what's your problem now?"

Plan of Correction

Accept [redacted] - 10/04/2024)

Wellness team re-educated on dignity and respect on 7/23/24. Staff person A re-educated on 9/9/24 (attached). The Administrator randomly speaks with residents to ensure they are treated with dignity and respect. The Administrator and Resident Council President also ask residents during Resident Council meetings held the 3rd Thursday of each month (7/25/24 and 8/22/24) attached. if they are treated with dignity and respect. Beginning 8/22/24 the administrator will speak with resident [redacted] weekly for 4 weeks to ensure she is treated with dignity and respect. If [redacted] feels at any time [redacted] is not treated properly, [redacted] is to notify Administrator.

Licensee's Proposed Overall Completion Date: 09/30/2024

Implemented [redacted] 10/16/2024)

85a Sanitary conditions

2. Requirements

2800.  
85.a. Sanitary conditions shall be maintained.

Description of Violation

On [redacted], at 12:23 pm, there was a strong odor of urine in room [redacted]; in the bathroom there were brown streaks of feces on the outside of the toilet, and the trash can was overflowing with wet incontinence products.

Repeat violation: 5/31/2024

Plan of Correction

Accept [redacted] - 09/25/2024)

The apartment was immediately cleaned. [redacted] receives daily housekeeping service, as this is an ongoing behavior based on [redacted] diagnosis per ASP (attached). The nursing director re-educated the wellness team on 6/28/24 to notify housekeeping if sanitary conditions were not maintained. The administrator and/or designee completes monthly apartment audits which was updated 7/1/24 to include sanitary conditions (attached). The Administrator and/or designee will continue to spot check apartments weekly to ensure sanitary conditions are maintained during rounds throughout the normal workday.

Licensee's Proposed Overall Completion Date: 09/13/2024

Implemented [redacted] - 10/16/2024)

85b Infestation

3. Requirements

2800.

85.b. There may be no evidence of infestation of insects or rodents in the residence.

Description of Violation

On [redacted] rooms [redacted] and [redacted] had active bed bugs.

Repeat violation: 5/31/2024

Plan of Correction

Accept [redacted] - 10/04/2024)

[redacted] was treated on 8/12/24, 8/18/24 and 9/9/24 (attached). [redacted] was treated on 8/28/24, 9/9/24 and final treatment scheduled for 9/16/24. The Administrator completes monthly apartment audits which was updated on 7/1/24 to include signs of infestation (attached). To maintain on-going compliance, as of 7/1/24 the administrator and/or designee will continue to spot check apartments weekly to ensure there is no evidence of bedbugs during rounds throughout the normal workday. This is also discussed at Resident Council meetings which are held the 3rd Thursday of each month (7/25/24 and 8/22/24 attached). and residents are reminded to report any sightings to the front desk immediately. Any areas of concern will be immediately reported to maintenance and pest control company.

Licensee's Proposed Overall Completion Date: 09/30/2024

Implemented [redacted] 10/16/2024)

144d Smoking outside

4. Requirements

2800.

144.d. Smoking outside of the smoking room is prohibited.

Description of Violation

On [redacted], at 12:23 pm, there was a smell of fresh cigarette smoke in the bathroom of room [redacted].

Plan of Correction

Accept [redacted] - 09/25/2024)

The resident in [redacted] received a 30-day discharge notice, as this was [redacted] 2nd offense (attached). Resident was also re-educated by Administrator on 8/21/24 on the importance of adhering to the smoking policy. Resident has a diagnosis which impairs her cognitive ability to follow rules. The Administrator is working with resident's case manager to find an alternative living arrangement by 9/21/2024. To ensure compliance is maintained, resident apartment is checked frequently by Administrator and/or designee throughout normal workday.

Licensee's Proposed Overall Completion Date: 09/21/2024

Implemented [redacted] 10/16/2024)

183d Current medications

5. Requirements

2800.

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

Description of Violation

On [redacted], [redacted] prescribed for resident [redacted] was in the residence's medication cart; however, the medication was discontinued on [redacted]

183d Current medications (continued)

Plan of Correction

Accept [REDACTED] - 10/04/2024)

The medication was immediately removed. The Nursing Director and/or designee will complete a monthly cart audit times 3 months to ensure compliance (attached). The Nursing Director will re-educate the medication technicians by 9/27/24 on regulation 183.d. Beginning in September to ensure compliance is maintained, the administrator will complete an audit on 5 residents per month times 3 months. Results of audits will be reviewed during the 4th quarter QMP meeting which will be held on 1/16/25 to determine if audits need to continue after 3 months.

Licensee's Proposed Overall Completion Date: 09/30/2024

Implemented [REDACTED] - 10/16/2024)

187a Medication record

6. Requirements

2800.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

12. Diagnosis or purpose for the medication, including pro re nata (PRN).

Description of Violation

Resident [REDACTED] is prescribed [REDACTED] and [REDACTED]. However, the resident's August 2024 medication administration record does not include diagnosis or purpose for the medications.

Plan of Correction

Accept [REDACTED] - 10/04/2024)

Diagnosis received from MD and added to MAR (attached). The Nursing Director and/or designee will check MAR's at the beginning of each month to ensure diagnosis or purpose is listed. The Nursing Director will re-educate the medication technicians on 187a by 9/27/24 (attached). To ensure compliance is maintained, the administrator will check 5 random MAR's monthly times 3 months beginning in September 2024. Results of audits will be reviewed during the 4th quarter QMP meeting which will be held on 1/16/25. to determine if audits need to continue after 3 months.

Licensee's Proposed Overall Completion Date: 09/30/2024

Implemented [REDACTED] - 10/16/2024)

187b Date/time of med admin

7. Requirements

2800.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

Resident [REDACTED] is prescribed [REDACTED], take 1 tablet twice a day as needed. The controlled substance log indicates this medication was dispensed on [REDACTED] and [REDACTED], at 9 am and 9 pm, however, Resident [REDACTED] August 2024 medication administration record does not include the initials of the staff person who administered [REDACTED] mg on [REDACTED] and [REDACTED], at 9 am and 9 pm.

Resident [REDACTED] is prescribed [REDACTED], 3 tablets, 3 times a day before meals. Resident [REDACTED] August 2024 medication administration record does not include the initials of the staff person who administered [REDACTED] 3 tabs on [REDACTED] at 12 pm, [REDACTED] at 5 pm and [REDACTED], at 12 pm.

**187b Date/time of med admin (continued)****Plan of Correction****Accept ( [REDACTED] 10/04/2024)**

Resident [REDACTED] was signed by med tech on the Controlled Substance log (attached). Resident [REDACTED] confirmed [REDACTED] received [REDACTED] tabs. The Nursing Director and/or designee will complete Medication Record check weekly times 3 months beginning 9/3/24 to ensure Medications are signed as given. The Nursing Director will re-educate the medication technicians by 9/27/24 on ensuring the medications are signed after administration and to check medication record at the end of their shift to confirm compliance. To ensure compliance. the administrator will check 5 random MAR's monthly times 3 months beginning in September 2024. Results of audits will be reviewed during the 4th quarter QMP meeting which will be held on 1/16/25 to determine if audits need to continue after 3 months.

**Licensee's Proposed Overall Completion Date: 09/30/2024****Implemented [REDACTED] - 10/16/2024)**