

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

May 20, 2025

[REDACTED]
GREENFIELD OF PERKIOMEN VALLEY LLC
[REDACTED]

RE: GREENFIELD OF PERKIOMEN
VALLEY
300 PERKIOMEN AVENUE
SCHWENKSVILLE, PA, 19473
LICENSE/COC#: 13735

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/10/2025 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: GREENFIELD OF PERKIOMEN VALLEY **License #:** 13735 **License Expiration:** 09/21/2025
Address: 300 PERKIOMEN AVENUE, SCHWENKSVILLE, PA 19473
County: MONTGOMERY **Region:** SOUTHEAST

Administrator

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

Legal Entity

Name: GREENFIELD OF PERKIOMEN VALLEY LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 05/23/2012 **Issued By:** Borough of Schwenksville

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 57 **Waking Staff:** 43

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Fine **Exit Conference Date:** 04/10/2025

Inspection Dates and Department Representative

04/10/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 90 **Residents Served:** 38

Secured Dementia Care Unit

In Home: Yes **Area:** The Willow **Capacity:** 44 **Residents Served:** 6

Hospice

Current Residents: 9

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 38
Diagnosed with Mental Illness: 2 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 19 **Have Physical Disability:** 1

Inspections / Reviews

04/10/2025 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 05/02/2025

05/01/2025 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 05/09/2025
Reviewer: [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 05/09/2025

Inspections / Reviews *(continued)*

05/20/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/09/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

183d - Prescription Current

1. 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

Resident [redacted] was discontinued on [redacted]. However, on [redacted], this medication was found in the memory care medication cart.

Plan of Correction

Accept [redacted] - 05/01/2025)

Director of nursing removed the medication on 4/10/2025. Director of nursing educated med techs on 4/11/2025 on proper medication documentation, and process for discontinued medications. The Director of nursing will audit medication carts weekly starting 4/13/2025, and continue weekly audits weekly for 6 weeks thereafter. Director of nursing will hold weekly questionnaires with 3 med techs for 4 weeks starting 4/13/2025.

Licensee's Proposed Overall Completion Date: 05/01/2025

Implemented [redacted] - 05/20/2025)

185a - Implement Storage Procedures

2. 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

On [redacted] at 8:00 PM, Resident [redacted] blood glucose reading was [redacted]. However, it was documented as [redacted] on the Medication Administration Record.

On [redacted] at 8:00 PM, Resident [redacted] blood glucose reading was [redacted]. However, it was documented as [redacted] on the Medication Administration Record.

Repeat violation date: [redacted] et al.

Plan of Correction

Accept [redacted] - 05/01/2025)

Director of nursing educated med techs on 4/11/2025 on glucometer calibration, readings and proper documentation. Director of nursing started weekly glucometer checks twice a week starting 4/13/2025, and will continue these weekly checks weekly for 6 weeks. Director of nursing will hold weekly Questionnaires with 3 med techs for 4 weeks starting 4/13/2025.

Licensee's Proposed Overall Completion Date: 05/01/2025

Implemented [redacted] - 05/20/2025)