

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

December 9, 2025

[REDACTED]
WOODS SERVICES
[REDACTED]
[REDACTED]

RE: BEECHWOOD CENTER 10
588 BEECHWOOD CIRCLE
LANGHORNE, PA, 19047
LICENSE/COC#: 14148

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/16/2025 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: BEECHWOOD CENTER 10 License #: 14148 License Expiration: 05/02/2026
 Address: 588 BEECHWOOD CIRCLE, LANGHORNE, PA 19047
 County: BUCKS Region: SOUTHEAST

Administrator

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

Legal Entity

Name: WOODS SERVICES
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: Total Daily Staff: 16 Waking Staff: 12

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Monitoring Exit Conference Date: 10/16/2025

Inspection Dates and Department Representative

10/16/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 8 Residents Served: 8
 Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:
 Hospice
 Current Residents: x
 Number of Residents Who:
 Receive Supplemental Security Income: 3 Are 60 Years of Age or Older: 4
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 8 Have Physical Disability: 8

Inspections / Reviews

10/16/2025 Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 11/14/2025

11/18/2025 - POC Submission

Submitted By: [REDACTED] Date Submitted: 12/05/2025
 Reviewed: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 12/07/2025

Inspections / Reviews *(continued)*

12/09/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/05/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

103e - Left Overs

1. Requirements

2600.

103.e. Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

Description of Violation

On [REDACTED] around 10:00 AM, two plastic bags of shredded lettuce and one plastic bag of cheese were observed in the home's refrigerator without a label/date.

Plan of Correction

Accept ([REDACTED] 11/18/2025)

All unlabeled food items (two bags of shredded lettuce and one bag of cheese) were immediately removed by the PCHA of the home on 10/16/2025.

The PCHA of the home will Implement daily refrigerator checks to ensure all food items are properly labeled and dated.

PCHA will continue to conduct weekly audits of food storage areas for compliance. Food Safety will be added as a standing topic to monthly house meetings by the PCHA as a reminder of the importance of staff monitoring.

Licensee's Proposed Overall Completion Date: 12/01/2025

Implemented [REDACTED] - 12/09/2025)

103g - Storing Food

2. Requirements

2600.

103.g. Food shall be stored in closed or sealed containers.

Description of Violation

On [REDACTED] around 10:00 AM, containers of banana pudding, bacon, and mixed vegetables which were not covered tightly were observed in the home's refrigerator.

Plan of Correction

Accept ([REDACTED] - 11/18/2025)

All improperly covered food items (banana pudding, bacon, and mixed vegetables) were immediately closed with tight-fitting lids or securely covered by the PCHA on 10/16/25 to prevent contamination and maintain food quality.

All staff will be Provide training on proper food storage procedures, emphasizing the requirement that all food items must be stored in covered containers with tight-fitting lids by the PCHA by 11/30/25. Staff will also be educated on food safety risks associated with improperly covered foods during this training.

The PCHA will add all food are proper covering to the weekly audit of proper food storage compliance checklist by 11/30/25.

Licensee's Proposed Overall Completion Date: 12/01/2025

Implemented [REDACTED] - 12/09/2025)

183d - Prescription Current

3. Requirements

2600.

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

183d Prescription Current (continued)

Description of Violation

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

Plan of Correction

Accepted [redacted] - 11/18/2025)

The PCHA of the home conducted a complete audit of all medications in the medication cart and storage areas for all residents to identify any other discontinued or expired medications on 10/31/25. All discontinued and expired medications were removed by the PCHA and delivered to nursing to be destroyed according to facility policy. All medication administration employees will be retrained by the Med trainer/Nursing on proper medication audit by 11/30/25. The training will include: Review all medication discontinuation orders weekly to ensure timely removal from carts. Nursing supervisor complete monthly cart audit to ensure all expired meds are removed from carts by December 2025.

Licensee's Proposed Overall Completion Date: 12/01/2025

Implemented [redacted] - 12/09/2025)

185a - Implement Storage Procedures

4. 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

Resident [redacted] is prescribed [redacted] as needed. Resident [redacted] is prescribed [redacted] as needed. On [redacted], these medications were not available in the home.

Plan of Correction

Accepted [redacted] - 11/18/2025)

PCHA notified nursing of the medication not available on 10/16/25 for replacement. Medications were made available by nursing on 10/17/25. PCHA will implement a monthly checklist specific for all as needed medications to confirm availability the first week of each month starting December 2025.

Licensee's Proposed Overall Completion Date: 12/05/2025

Implemented [redacted] - 12/09/2025)

187b - Date/Time of Medication Admin.

5. Requirements

2600.

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

Description of Violation

The home's October 2025 medication administration records do not include the initials of the staff who administered resident # [redacted] on [redacted] at 04:00 PM & 08:00 PM, [redacted] at 08:00 AM & 04:00 PM, [redacted] at 08:00 AM, [redacted] at 08:00 AM on [redacted] & [redacted] resident [redacted] on [redacted] at 8 AM, 4 PM, 8 PM, [redacted] at 8 AM & 04:00 PM resident [redacted] and [redacted] at 08:00 PM on [redacted]

187b - Date/Time of Medication Admin. (continued)

Plan of Correction

Accepted [REDACTED] - 11/18/2025)

PCHA will retrain staff administering medications on the importance of initialing all medications when administered or notating a reason not given for follow-up with initials by 12/1/25. Nursing will implement weekly monitoring of the MARs and report any missing initials to the PCHA for follow-up and remediation starting 11/10/25. PCHA will additionally complete a weekly monitoring of the MAR when conducting the weekly medication cart check starting 11/10/25.

Licensee's Proposed Overall Completion Date: 12/01/2025

Implemented [REDACTED] - 12/09/2025)

187d - Follow Prescriber's Orders

6. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident [REDACTED] is prescribed [REDACTED] drops once daily at bedtime. However, this medication was not available at the home on [REDACTED] and according to staff interviews, the medication has already been ordered but delivery is not expected for a couple of days.

Plan of Correction

Accepted [REDACTED] - 11/18/2025)

PCHA notified nursing of the medication not available on 10/16/25 for replacement. Medication was made available by nursing on 10/17/25. PCHA will discuss the importance of ensuring medications are ordered early enough to ensure that it is always available during the November staff meeting by November 30, 2025. PCHA will complete a weekly monitoring of the cart and medication availability starting 11/10/25.

Licensee's Proposed Overall Completion Date: 12/01/2025

Implemented [REDACTED] 12/09/2025)