

Department of Human Services  
Bureau of Human Service Licensing

October 11, 2022

[REDACTED]  
WYNDMOOR ASSISTED LIVING COMPANY LLC  
551 EAST EVERGREEN AVENUE  
WYNDMOOR, PA, 19038

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

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/01/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Shawn Parker

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

**Facility Information**

Name: *SPRINGFIELD SENIOR LIVING COMMUNITY* License #: *14484* License Expiration: *05/12/2023*  
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: *551 EAST EVERGREEN AVENUE, WYNDMOOR, PA, 19038*  
Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *78* Waking Staff: *59*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Incident* Exit Conference Date: *09/02/2022*

**Inspection Dates and Department Representative**

09/01/2022 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *103* Residents Served: *51*

**Special Care Unit**

In Home: *Yes* Area: *3rd floor Memory Care* Capacity: *33* Residents Served: *9*

**Hospice**

Current Residents: *NM*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *50*  
Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *1*  
Have Mobility Need: *27* Have Physical Disability: *3*

**Inspections / Reviews**

**09/01/2022 - Partial**

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *09/24/2022*

**09/20/2022 - POC Submission**

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *10/03/2022*

Inspections / Reviews *(continued)*

10/11/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

88a Floors, walls, ceilings, windows, doors

1. Requirements

2800.

88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

On [REDACTED]/22, the day of the incident the railing was broke and hanging with jagged pieces of exposed metal. Resident #1's clothing was found in the corner of the rail landing.

On [REDACTED]/22, observed during the physical site inspection - There was yellow caution tape across the railing. The railing was loose, wobbly and not securely attached to the foundation.

Plan of Correction

Directed

Replacing railing, waiting for contractor to schedule a date. Maintenance Director will monitor and audit monthly for 3 months to ensure railing is secured.

Maintenance Director

DPOC -SP - 09-20-2022

Railing to be fixed within 10 calendar days receipt of POC. Quote from contractor and proof of repairs to be maintained for Department review. Maintenance director audits to be maintained by home and made available for Department review.

Completion Date:

Document Submission

Implemented

Replacing railing, waiting for contractor to schedule a date. Maintenance Director will monitor and audit monthly for 3 months to ensure railing is secured.

Maintenance Director

DPOC -SP - 09-20-2022

Railing to be fixed within 10 calendar days receipt of POC. Quote from contractor and proof of repairs to be maintained for Department review. Maintenance director audits to be maintained by home and made available for Department review.

91 Telephone Numbers

1. Requirements

2800.

91. Emergency Telephone Numbers - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and assisted living residence complaint hotline shall be posted on or by each telephone with an outside line.

Description of Violation

On 9/1/22, during the physical site inspection there were no emergency telephone numbers to include the nearest hospital and fire Department on or by the telephone at the nurse station.

91 Telephone Numbers (continued)

Plan of Correction

Accept

Emergency numbers were placed by all phones at the nurse's stations. Director of Nursing will audit weekly for the next 3 months to make sure emergency phone numbers are not removed.

09/03/2022 Director of Nursing

Completion Date: 09/16/2022

Document Submission

Implemented

Emergency numbers were placed by all phones at the nurse's stations. Director of Nursing will audit weekly for the next 3 months to make sure emergency phone numbers are not removed.

09/03/2022 Director of Nursing

187d Follow prescriber's orders

1. Requirements

2800.

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

Description of Violation

Resident #1 is prescribed 1mg of Clonazepam. However, this medication was not administered to resident #1 on [redacted]/22 or [redacted]/22 at [redacted] PM because the medication was not available in the residence. The pharmacy sent the medication to the home on 8/18/22.

Plan of Correction

Accept

Received medication from pharmacy and administered to the resident as soon as it came in. Director of Nursing will audit medications once a week randomly for the next three months to ensure all medications are coming in from pharmacy and administered when due.

09/03/2022 Director of Nursing

Completion Date: 09/16/2022

Document Submission

Implemented

Received medication from pharmacy and administered to the resident as soon as it came in. Director of Nursing will audit medications once a week randomly for the next three months to ensure all medications are coming in from pharmacy and administered when due.

09/03/2022 Director of Nursing

2. Requirements

2800.

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

Description of Violation

Resident #1 is prescribed:

- 30mg of Mirtazapine at bedtime. However, resident #1 was not administered the medication on [redacted]/22 at [redacted] PM.
  - 4mg of Risperidone at bedtime. However, resident #1 was not administered the medication on [redacted]/22 at [redacted] PM.
- There was no documentation or explanation as to why the medication was not administered.

**187d Follow prescriber's orders (continued)****Plan of Correction****Directed**

*Investigation showed that medications were administered and documentation was missed. Director of Nursing will audit MARS weekly to ensure all medications are being signed out.*

*09/03/2022 Director of Nursing*

*DPOC - SP - 09-20-2022*

*Within 10 day calendar receipt of POC, med techs will be trained on medication administration and documentation. Training and signature sheets will be maintained by home and made available for Department review. Weekly audits of MARS's by nursing director to be made available for Department review.*

**Completion Date:****Document Submission****Implemented**

*Investigation showed that medications were administered and documentation was missed. Director of Nursing will audit MARS weekly to ensure all medications are being signed out.*

*09/03/2022 Director of Nursing*

*DPOC - SP - 09-20-2022*

*Within 10 day calendar receipt of POC, med techs will be trained on medication administration and documentation. Training and signature sheets will be maintained by home and made available for Department review. Weekly audits of MARS's by nursing director to be made available for Department review.*