



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: September 8, 2014

Ms. Betty Bebian, Administrator
Mary J. Drexel Home D/B/A The Hearth at Drexel
238 Belmont Avenue
Bala Cynwyd, Pennsylvania 19004

RE: Mary J. Drexel Home d/b/a
The Hearth at Drexel
140620

Dear Ms. Bebian:

As a result of the Department of Public Welfare's licensing inspection on August 7, 2014 of the above facility, the violations with 55 Pa.Code Ch. 2800 (relating to Assisted Living Residences) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2800 must be maintained.

Sincerely,

A handwritten signature in cursive script that reads "Gloria Emick".

Gloria Emick
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

LICENSING INSPECTION SUMMARY
Assisted Living Residences - 55 Pa.Code §2800

Name of Residence: The Hearth at Drexel

Address: 238 Belmont Avenue, Bala Cynwyd, PA 19044

License Number: 140620

Type of Inspection: Full

Reason(s) for Inspection: 90-Day Interim

Notice: Unannounced

On-site Inspection Dates and Department Representatives On-site: 8/07/2014
Israel Springs, Douglas Hoover

Off-site Inspection Dates and Department Representatives, if Applicable:

RECEIVED

SEP 05 2014

CENTRAL REGION FIELD OFFICE
Human Services Licensing

LIS - [The Hearth at Drexel] - [8/07/2014] - [Israel Springs]

Regulation: § 2800.25 (b) The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees. The contract must run month-to-month with automatic renewal unless terminated by the resident with 14 days notice or by the residence with 30 days notice in accordance with § 2800.228 (relating to transfer and discharge).

Violation: The contract, dated 6/28/2014 for Resident #1, was not signed by the resident, nor was there any indication that the resident refused or was unable to sign.

Plan of Correction

Resident #1 is unable to sign the contract.
Contract was updated stating "Resident is unable to sign" See attached sign page from contract.
This requirement was explained to admissions and administrative staff by surveyors during inspection.
All contracts will be either signed by resident or will indicate if unable or refused.

Printed Name and Title of Legal Entity Representative (Required on all pages)

Betty Bebian

Signature of Legal Entity Representative (Required on all pages)

Betty Bebian

Date 9-3-14

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 9-5-14
(Date)

Plan of correction implementation status as of 9-5-14
(Date)

The above plan of correction was approved by BB
(Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

LIS - [The Hearth at Drexel] - [8/07/2014] - [Israel Springs]

Regulation: § 2800.82 (c) Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the residence are able to safely use or avoid poisonous materials.

Violation:

- 1) A can of *Airwick 4 in 1* that had a label warning to "call poison control if ingested" and a dispenser of *Soft Soap Hand Soap*, labeled, "contact poison control if ingested," was found in Resident #1's Apartment W14 in the Special Care Unit. The resident has not been assessed to safely use or avoid poisonous materials.
- 2) In Apartment W45, where Resident #2 resides, there was a dispenser of *CVS Hand Soap* by the kitchen sink. The label contained the warning, "contact poison control if ingested." The resident has not been assessed to safely use or avoid poisonous materials.

withdrawn - &E

Plan of Correction

Resident #1

Airwick 4in1 and Soft hand soap was brought in by residents family the morning of our inspection Aug. 7th. Daughter feels [redacted] is safe with some items. It was explained to the daughter that it is not safe for [redacted] or other residents in a Memory Support Household to have poisonous material accessible to residents. Staff will monitor residents room to ensure compliance.

Resident #2

Does not live the Memory Support Household and is AA90. [redacted] ASP does state that [redacted] is safe with poisons. Please see attached Asp for resident #2.

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Betty Bebian

Signature of Legal Entity Representative (Required on all pages)

Betty Bebian

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LIS – [The Hearth at Drexel] – [8/07/2014] – [Israel Springs]

Regulation: § 2800.184 (b) If the OTC medications and CAM belong to the resident, they must be identified with the resident's name.

Violation: The following medications were unlabeled for Resident #3 in the medication cart: 200 tablets of Bayer 81 mg aspirin, 120 soft gel tablets of Vitamin D3 2000, 120 tablets of Dairy Relief Lactose, 2 bottles of Magnesium Citrate and Folic A 400 mcg tablets.

Plan of Correction

All the above mentioned medications were labeled immediately during the inspection by nurse. All nurses advised and sign placed in medication room reminding nurses to label all OTC and CAM medications upon receipt. Administrator has audited meds in med room weekly since inspection on August 7th. All OTC and CAM's have been labeled.

Administrator will continue random inspection to ensure compliance.

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Signature of Legal Entity Representative (Required on all pages)

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Partially Implemented – Inadequate Progress

Not Implemented

LIS - [The Hearth at Drexel] - [8/07/2014] - [Israel Springs]

Regulation: § 2800.227 (h) If a resident or designated person is unable or chooses not to sign the final support plan, a notation of inability or refusal to sign shall be documented.

Violation: Resident #1's Assessment-Support Plan (ASP), dated 6/28/2014 was not signed by the resident, nor was there any indication that the resident refused or was unable to sign.

Plan of Correction

Resident #1 is unable to sign his ASP.
The Asp was updated to include "Resident is unable to sign"

Administrator counseled nures responsible for completion of ASP on this regulation. All ASP were reviewed to ensure they were all signed appropriately.

Administrator will periodically reveiw ASP for proper signature or indication of refusal or inability to sign.

See attached updated sign page for Resident #1.

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Betty Bebian

Signature of Legal Entity Representative (Required on all pages)

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