

Department of Human Services  
Bureau of Human Service Licensing

January 6, 2021

PAULITA MOORE-HALL, DIRECTOR OF NURSING  
MARY J DREXEL HOME  
238 BELMONT AVENUE  
BALA CYNWYD, PA 19004

RE: THE HEARTH AT DREXEL  
238 BELMONT AVENUE  
BALA CYNWYD, PA, 19004  
LICENSE/COC#: 14062

Dear Ms. Moore-Hall,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 12/10/2020, 12/11/2020, 12/14/2020 of the above facility, the citations specified on the enclosed Licensing Inspection Summary (LIS) were found.

We have determined that your plan of correction is: Acceptable

All citations specified on the plan of correction must be corrected by the dates specified on the License Inspection Summary (violation report) and continued compliance with Department statutes and regulations must be maintained.

Sincerely,  
Mia Johnson

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

**Facility Information**

Name: *THE HEARTH AT DREXEL* License #: *14062* License Expiration Date: *06/18/2021*  
 Address: *238 BELMONT AVENUE, BALA CYNWYD, PA 19004*  
 County: *MONTGOMERY* Region: *SOUTHEAST*

**Administrator**

Name: *Dana O'Donnell* Phone: *2156645967* Email:  
*DODONNELL@THEHEARTHATDREXEL.ORG,*

**Legal Entity**

Name: *MARY J DREXEL HOME*  
 Address: *238 BELMONT AVENUE, BALA CYNWYD, PA, 19004*  
 Phone: *2156645967* Email: *pmoore-hall@thehearthatdrexel.org*

**Certificate(s) of Occupancy**

Type: *R-3* Date: *03/10/2014* Issued By: *Lower Merion Township  
Building and Planning Department*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *106* Waking Staff: *80*

**Inspection**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Incident* Exit Conference Date: *12/14/2020*

**Inspection Dates and Department Representative**

*12/10/2020 - Off-Site: Dean Gray*  
*12/11/2020 - Off-Site: Dean Gray*  
*12/14/2020 - Off-Site: Dean Gray*

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *85* Residents Served: *65*

**Special Care Unit**

In Home: *Yes* Area: *Memory Care* Capacity: *20* Residents Served: *15*

**Hospice**

Current Residents: *5*

**Resident Demographic Data as of Inspection Dates (*continued*)**

## Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 65

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 41

Have Physical Disability: 0

**Inspections / Reviews**

## 12/10/2020 - Partial

Lead Inspector: *Dean Gray*Follow-Up Type: *POC Submission*Follow-Up Date: *12/28/2020*

## 1/6/2021 - POC Submission

Lead Reviewer: *Mia Johnson*Follow-Up Type: *Document Submission*Follow-Up Date: *01/09/2021*

**227c Final support plan - revision****1. Requirements**

2800.

227.c. The final support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment. The residence shall review each resident's final support plan on a quarterly basis and modify as necessary to meet the resident's needs.

**Description of Violation**

*Resident #1's assessment was completed on 10/26/20; however, the resident's support plan was not revised until 12/08/20.*

**Plan of Correction****Accept**

*It is the policy of The Hearth at Drexel to revise the final support plan within 30 days upon completion and upon changes in the residents needs. The support plan was updated to reflect all changes. Policy reviewed with Director of Nursing to ensure that all support plans are updated per the regulations. All support plans have been audited and plan in place to ensure that policy is being followed. On-going education will occur for all clinical staff on proper documentation*

**Completion Date:** 12/30/2020