

Department of Human Services
Bureau of Human Service Licensing

June 15, 2021

██████████ ADMINISTRATOR / ED
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 ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 06/04/2021 of the above facility, no regulatory citations have been identified as a result of this inspection.

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: *THE HEARTH AT DREXEL* License #: *14062* License Expiration Date: *06/18/2022*
Address: *238 BELMONT AVENUE, BALA CYNWYD, PA 19004*
County: *MONTGOMERY* Region: *SOUTHEAST*

Administrator

Name: [REDACTED] Phone: *2156645967* Email: [REDACTED]

Legal Entity

Name: *MARY J DREXEL HOME*
Address: *238 BELMONT AVENUE, BALA CYNWYD, PA, 19004*
Phone: *2156645967* Email: [REDACTED]

Certificate(s) of Occupancy

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

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *87* Waking Staff: *65*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Incident* Exit Conference Date: *06/04/2021*

Inspection Dates and Department Representative

06/04/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *85* Residents Served: *63*

Special Care Unit

In Home: *Yes* Area: *First Floor West* Capacity: *20* Residents Served: *13*

Hospice

Current Resident: *2*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *63*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *24* Have Physical Disability: *0*

Inspections / Reviews

06/04/2021 - Partial

Lead Inspector: [REDACTED]

Follow Up Type: *Not Required*

No Deficiencies Identified