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

August 24, 2023

, ADMINISTRATOR 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 review on 07/06/2023, 07/07/2023, 07/12/2023 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,

cc: Pennsylvania Bureau of Human Service Licensing

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Facility Information

Name: THE HEARTH AT DREXEL Licen e #: 14062 Licen e Expiration: 06/18/2024

Address: 238 BELMONT AVENUE, BALA CYNWYD, PA 19004

County: MONTGOMERY Region: SOUTHEAST

Administrator

Name Phone: Email:

Legal Entity

Name: MARY J DREXEL HOME

Address:

Phone Email:

Certificate(s) of Occupancy

Type: R 3 Date: 03/10/2014 I ued By: Lower Merion Township

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 89 Waking Staff: 67

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:

Reason: Complaint Exit Conference Date: 07/12/2023

Inspection Dates and Department Representative

07/06/2023 On Site

07/07/2023 Off Site

07/12/2023 Off Site

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 85 Residents Served: 69

Special Care Unit

In Home: Yes Area: SDCU Capacity: 20 Residents Served: 14

Hospice

Current Residents: 6

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 69

Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0

Have Mobility Need: 20 Have Physical Disability: 0

Inspections / Reviews

07/06/2023 - Partial

Lead Inspector: Follow-Up Type: POC Submission Follow-Up Date: 07/29/2023

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Inspections / Reviews (continued)

07/31/2023 - POC Submission	
Submitted By:	Date Submitted: 08/22/2023
Reviewer:	Follow-Up Type: POC Submission Follow-Up Date: 08/05/2023
08/09/2023 - POC Submission	
Submitted By:	Date Submitted: 08/22/2023
Reviewer:	Follow-Up Type: Document Submission Follow-Up Date: 08/16/2023
08/24/2023 - Document Submission	
Submitted By:	Date Submitted: 08/22/2023
Reviewer:	Follow-Up Type: Not Required

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16c Incident reporting

1. Requirements

2800.

16.c. The residence shall report the incident or condition to the Department's assisted living residence office or the assisted living residence complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2800.15 (relating to abuse reporting covered by law).

Description of Violation

On 7/2/2023, the hot water heater broke at the residence and the residence went without hot water for a period of 4 days. The residence did not report this incident to the Department until 7/6/2023.

Plan of Correction Accept - 08/09/2023)

It is the responsibility of all staff to report any malfunction/loss of utilities (hot water, water, electricity, etc.) to their direct supervisor upon discovery, who will report immediately to the Director of Facilities. In addition, the Director of Facilities is responsible for the completion of the hot water temperature log daily to ensure water temperatures are within acceptable range for resident use. These records will be maintained in the Director of Facilities' office in the Hot Water Temperature Binder.

The Director of Facilities is responsible to report any malfunction/loss of utilities immediately to the Executive Director. If upon further investigation by the Director of Facilities it is determined repair or restoration will not be completed within two hours, Executive Director will notify the Department by submitting a Reportable Incident.

In addition to the above plan of correction: All staff will be re-educated on the reportable incidents policy and procedures and what their responsibilities are. Documentation of education will be kept. MJ

Licensee's Proposed Overall Completion Date: 08/04/2023

Implemented

- 08/24/2023)

24 Personal hygeine

2. Requirements

2800.

- 24. Personal Hygiene A residence shall provide the resident with assistance with personal hygiene as indicated in the resident's assessment and support plan. Personal hygiene includes one or more of the following:
 - 1. Bathing.
 - 2. Oral hygiene.
 - 3. Hair grooming and shampooing.
 - 4. Dressing, undressing and care of clothes.
 - 5. Shaving.
 - 6. Nail care.
 - 7. Foot care.
 - 8. Skin care.

Description of Violation

On 7/2/2023 the hot water at the home stopped working and was not repaired until 7/5/2023 at around 4:30 pm. The residents did not receive showers and basic hygiene during this time period.

Plan of Correction Accept (- 08/09/2023)

Upon discovery of the loss of hot water in resident areas, the Director of Facilities will determine if there is still hot water available in service areas in the building. If hot water is available in service areas, it will be brought to

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24 Personal hygeine (continued)

resident areas for purposes of meeting the basic hygiene needs of residents. Temperature of water will be checked before resident use by the caregiver assigned to provide care. In addition, each resident will have access to disposable cleansing cloths.

f there is no access to hot water and the utility will not be restored within 24 hours, residents will have the option of going to the home of a family member/friend or transferring temporarily to a designated community as outlined in our Emergency Plan until service is restored. If a transfer of residents is deemed necessary, Executive Director or designee is responsible for notifying the Department and resident's responsible party and coordinating the transfer.

Licensee's Proposed Overall Completion Date: 08/05/2023

Implemented (MJ - 08/24/2023)

107b Emergency procedures

3. Requirements

2800.

107.b. The residence shall have written emergency procedures that include the following:

- 1. Contact information for each resident's designated person.
- 2. The residence's plan to provide the emergency medical information for each resident that ensures confidentiality.
- 3. Contact telephone numbers of local and State emergency management agencies and local resources for housing and emergency care of residents.
- 4. Means of transportation in the event that relocation is required.
- 5. Duties and responsibilities of staff persons during evacuation, transportation and at the emergency location. These duties and responsibilities shall be specific to each resident's emergency needs.
- 6. Alternate means of meeting resident needs in the event of a utility outage.

Description of Violation

The home did not follow the written Emergency Procedures and evacuate the residents during their utility emergency and allowed residents to go without hot water. The Residents were not able to shower and practice basic hygiene.

Plan of Correction Accept (MJ - 08/09/2023)

To ensure the timely determination of implementing the Emergency Procedures all staff are responsible for reporting utility outages immediately upon discovery, following the proper reporting chain; immediate supervisor, Director of Facilities, Executive Director. The Executive Director is responsible for implementing the Emergency Plan once a determination has been made utility outage will last for more than 24 hours. Executive Director is responsible for ensuring the Emergency Plan is followed.

n addition to the above plan of correction: All staff will be re-educated on the home's emergency preparedness plan and what their responsibilities are during an emergency. Documentation of education will be kept. MJ

Licensee's Proposed Overall Completion Date: 08/05/2023

Implemented (MJ - 08/24/2023)

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