



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail [REDACTED]  
Sent via e-mail [REDACTED]  
March 27, 2019

Mr. Steven T. Cherry  
Executive Director  
The New Heritage Towers, Inc.  
200 Veterans Lane  
Doylestown, Pennsylvania 18901

RE: Wesley Enhanced Living Doylestown  
License #: 127180

Dear Mr. Cherry:

As a result of the Department's Bureau of Human Services Licensing inspection on October 25, 2018 of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

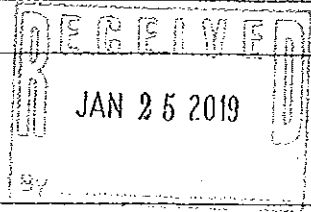
Sincerely,

A handwritten signature in cursive script that reads "Mia Johnson".

Mia Johnson  
Human Services Licensing Supervisor

Enclosure  
Violation Report

**VIOLATION REPORT**  
**PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: Wesley Enhanced Living Doylestown		License Number: 12718
Address: 200 Veterans Lane, Doylestown, PA 18901		County: Bucks
Administrator: Marline Minninger		Region: SOUTHEAST
Legal Entity Name: Wesley Enhanced Living Doylestown		
Legal Entity Address: 200-Veterans Lane, Doylestown, PA 18901		
Certificate(s) of Occupancy C-2 LP 06/08/2001 PA dept of LI		
<b>Staffing Hours</b>		
Resident Support: 0	Total Daily Staff: 63	Waking Staff: 47
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
<b>Reason(s) for Inspection(s)</b> Incident		
<b>On-Site Inspections Dates and Department Representatives On-Site</b> 10/25/2018: Heinberg, Jennie		
<b>Off-Site Inspection Dates and Inspectors, If Applicable</b>		
<b>Other Details</b>		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 75 Number of Residents Served: 57 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served In Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 2 Number of Hospice Residents in past year: 11		<b>Number of Residents who:</b> Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 57 Have Mental Illness: 0 Have an Intellectual Disability: 1 Have a Mobility Need: 6 Have a Physical Disability: 5

Violation Report: 12718 - 10/25/2018 - Heinberg, Jennie  
 PCH Name: Wesley Enhanced Living Doylestown

1. REGULATION 55 Pa.Code §2600  
 2600.18 - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

2a. DESCRIPTION OF VIOLATION

Care Facility Carbon Monoxide Alarms Standards Act-Enactment Act of Jun 23, 2016 states "In the event that an alarm installed in accordance with this section sounds, the care facility staff shall:

- (i) Take immediate action to introduce fresh outside air into the care facility by opening available windows and doors, unless opening a specific door presents additional risk to resident safety."
- (ii) Contact emergency services in accordance with the care facility's written policies and procedures relating to carbon monoxide alarms and evacuation.
- (iii) Move residents to the nearest source of fresh outside air, account for all residents and remain with the residents until first responders arrive and assess the need for evacuation.
- (iv) Evacuate residents when first responders consider an evacuation necessary."

On 10/23/18, at approximately 12:20 pm, the carbon monoxide detectors alarmed on the first floor. The home did not initiate their carbon monoxide preparedness plan. The Home did not open doors or windows to introduce fresh outside air into the home. All residents were not moved to the nearest source of fresh outside air and nor did they account for all residents while waiting for first responders to arrive.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

Please see attached initial Report sent to the Department 10/23/18

During investigation on 10/25/18 it was reported to the investigator that windows were opened, residents were evacuated outside and all residents were accounted for.

See attached. 3/25/19 *MJ*

Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page)			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)			Date
Martine Minninger PCHA			1/25/19

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

The above plan of correction is approved as of 3/25/19  
 (Date)

Plan of correction implementation status as of 3/25/19  
 (Date)

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

The above plan of correction was approved by *MJ*  
 (Initials)

**RE: Incident on 10/23/18 Requiring Emergency Services**

At approximately 12:20pm 10/23/18 carbon monoxide detectors alarmed on the first floor in the area of the loading docks and near main kitchen (not in the personal care section of the building). Maintenance staff called 911 and Doylestown EMS/Fire departments responded. The 1<sup>st</sup> floor of the building was evacuated.

During that time, fire department personnel walked through the entire building noting a rise in CO levels on the high side of the 2<sup>nd</sup> floor (personal care) but at no time did the CO detectors on the 2<sup>nd</sup> floor alarm.

Under the instruction of the Fire Marshall, all residents, visitors, and staff were evacuated off of the high side of the 2<sup>nd</sup> floor (this included the dining room), downstairs and outside the main entrance.

As a precaution, this administrator also instructed staff to evacuate the low side of the 2<sup>nd</sup> floor as well.

All PC residents on the high side were evacuated within 10 minutes of the alert by fire personnel and overall evacuation took approximately 15-20 minutes.

Fire personnel continued monitoring CO levels in the building noting that they were decreasing eventually going down to zero. At approximately 1:30 a representative from PECO inspected the building noting there were no signs of CO in the building.

The PECO representative and Fire Marshall concluded that a delivery truck that was idling at the loading dock, which is in the back of the building, was the source of the CO as it is indicated the first alarm to activate was at the loading dock.

Residents were permitted to return to their apartments at approximately 1:35pm

Evacuation was treated similarly as a fire drill, all PC residents accounted for and notified of event.

**Plan to Prevent Reoccurrence:**

All key personnel debriefed to review the events that had occurred. Facility Manager is to contact all delivery companies to remind drivers to NOT leave trucks idling during deliveries. Trucks must be turned off. Loading dock doors are to never be propped open as well.

CO detection policy has been reviewed and updates will be made if necessary.

All staff are to be retrained of policy during next town hall meeting as well, the last training was last year so refresher is warranted.

Maintain audits for Department review for a period of three years. 3/25/19 *MDJ*

*[Handwritten signature]*

PCHA

Martine Minninger

1/25/19