



Sent via e-mail to: drpace61@gmail.com
MAILING DATE: February 11, 2020

Mr. Nathaniel D. Pace
Administrator
Morris-Pace Assisted Living, Inc.
416 Reading Avenue
West Reading, Pennsylvania 19611

RE: Morris-Pace Personal Care
License #: 215900

Dear Mr. Pace:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on December 11, 2019 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Anne Graziano". The signature is written in a cursive style.

Anne Graziano
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: MORRIS-PACE PERSONAL CARE

License Number: 21590

Address: 416 READING AVENUE,, WEST READING, PA 19611

County: BERKS

Region: NORTHEAST

Administrator

Name: Nathaniel D. Pace

Phone: 6103719590

Email: DRPACE61@GMAIL.COM

Legal Entity

Name: MORRIS-PACE ASSISTED LIVING INC

Address: 416 READING AVENUE, WEST READING, PA, 19611

Certificate(s) of Occupancy

Type: Other

Date:

Issued By:

Staffing Hours

Resident Support Staff:

Total Daily Staff: 45

Waking Staff: 34

Inspection

Type: Partial

BHA Docket #:

Notice: Unannounced

Reason: Complaint, Incident

Inspection Dates and Department Representative

12/11/2019 - On-Site: Jason Harvey

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 63

Residents Served: 45

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 45

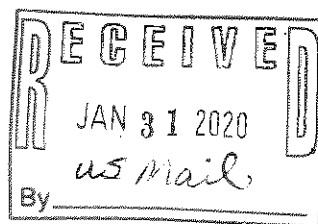
Are 60 Years of Age or Older: 27

Diagnosed with Mental Illness: 45

Diagnosed with Intellectual Disability: 1

Have Mobility Need: 0

Have Physical Disability: 1



88a - Surfaces

Regulations

2600. 88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation


The steps located on the left side entrance of the home were in disrepair on the 3rd, 6th and 9th step.

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.)

- 1) All surfaces must be kept in good repair to prevent issues for residents.
- 2) Stairs on other side of building were decaying and needed repair.
- 3) Maintenance nor Admin was paying attention to that stairwell.
- 4) Maintenance purchased the repair kit and repaired the stairs.
- 5) Admin is having maintenance, while doing the interior checks, will be checking exterior issues as well to prevent future violations.
- 6) Admin, maintenance/staff are required to inform Admin of all issues.

Legal Entity Representative

Signature 

Printed Name and Title Nathaniel D Lee

Date 1/28/2020


DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 1-31-20 (Date)

viewed documentation @ SOB

Plan of correction implementation status as of 1-31-20 (Date)

Implemented Not Implemented

The above plan of correction was approved by  (Initials)