

Department of Human Services
Bureau of Human Service Licensing

March 2, 2021

██████████ ADMINISTRATOR
470 MANOR OPERATING LLC
490 MANOR AVENUE
DOWNTOWN, PA 19335

RE: ST. MARTHA VILLA FOR
INDEPENDENT & RETIREMENT
LIVING
490 MANOR AVENUE
DOWNTOWN, PA, 19335
LICENSE/COC#: 14108

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/28/2020, 12/29/2020, 01/06/2021, 01/07/2021, 01/11/2021, 01/12/2021, 01/14/2021, 01/19/2021, 01/20/2021, 01/21/2021, 01/25/2021, 01/26/2021, 01/27/2021, 01/28/2021, 01/29/2021, 02/01/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance 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: ST. MARTHA VILLA FOR INDEPENDENT & RETIREMENT License #: 14108 License Expiration Date: 11/03/2021
LIVING
Address: 490 MANOR AVENUE, DOWNINGTOWN, PA 19335
County: CHESTER **Region:** SOUTHEAST

Administrator

Name: [REDACTED] **Phone:** 6108735300 **Email:** [REDACTED]

Legal Entity

Name: 470 MANOR OPERATING LLC
Address: 490 MANOR AVENUE, DOWNINGTOWN, PA, 19335
Phone: 6108735300 **Email:** [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 72 **Waking Staff:** 54

Inspection

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident **Exit Conference Date:** 02/01/2021

Inspection Dates and Department Representative

12/28/2020 - Off-Site: [REDACTED]
12/29/2020 - Off-Site: [REDACTED]
01/06/2021 - Off-Site: [REDACTED]
01/07/2021 - Off-Site: [REDACTED]
01/11/2021 - Off-Site: [REDACTED]
01/12/2021 - Off-Site: [REDACTED]
01/14/2021 - Off-Site: [REDACTED]
01/19/2021 - Off-Site: [REDACTED]
01/20/2021 - Off-Site: [REDACTED]
01/21/2021 - Off-Site: [REDACTED]
01/25/2021 - Off-Site: [REDACTED]
01/26/2021 - Off-Site: [REDACTED]
01/27/2021 - Off-Site: [REDACTED]
01/28/2021 - Off-Site: [REDACTED]
01/29/2021 - Off-Site: [REDACTED]

Inspection Dates and Department Representative (continued)

02/01/2021 Off Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 137

Residents Served: 53

Secured Dementia Care Unit

In Home: Yes

Area: SCU

Capacity: 30

Resident Served: 16

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 49

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 19

Have Physical Disability: 4

Inspections / Reviews

12/28/2020 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: POC Submission

Follow Up Date: 02/14/2021

2/12/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow Up Type: Document Submission

Follow-Up Date: 03/01/2021

3/2/2021 Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: Not Required

16c - Written Incident Report

1. Requirements

2600.

- 16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On December 19, 2020, the boilers in the home stopped working. There was no heat in the PC area of the home. The home did not report this incident to the department until December 24, 2020.

Plan of Correction

Accept

Unable to correct past delay in reporting.

Administrator will educate the management and administrative team of reportable events and 24-hour requirement of reporting. Completion Date 2/17/2021

Nursing Director will educate the licensed Nurses of reportable events and the 24-hour requirement of reporting. Completion Date 2/17/2021

The 24-hour report will be reviewed daily by Nursing Director / Designee for any events that may need reporting. Ongoing.

Administrator / Designee will monitor compliance by weekly audits to determine if any reportable events occurred and if they were reported within the required time. Audits to be completed weekly times 4 weeks then Monthly times two months. First audit to be completed 2/19/2021. Results to be forwarded to Quality Assurance.

Completion Date: 02/19/2021

Document Submission

Implemented

Education on reportable events has been completed and attached. Audits to ensure reportable events are reported timely are attached.

83a Indoor Temperature

1. Requirements

2600.

- 83.a. The indoor temperature, in areas used by the residents, must be at least 70°F when residents are present in the home.

Description of Violation

On 12/18/20 and 12/19/20, when residents were present in the home, the temperature in multiple resident rooms in PC was under 70 degrees Fahrenheit.

83a - Indoor Temperature (continued)

Plan of Correction

Accept

Resident room temperatures were corrected upon boiler repair on 12/19/2020.

Maintenance Director / Designee will conduct random apartment temperature checks weekly to ensure temperatures are maintained at least 70 degrees. Temperature audits will be conducted weekly times 4 weeks then resume monthly. First audit completion date 2/19/2021

Maintenance Director / Designee will conduct monthly boiler system checks to ensure all mechanics in functioning order and maintained. Completed by 2/28/2021 and monthly thereafter.

A professional contracted service will provide annual preseason heating system check to boilers. Completed by September 2021 prior to Fall / Winter season. Completed annually thereafter.

Administrator / designee will monitor compliance by auditing the monthly documentation of boiler checks. Monthly times four months. Completion date 3/1/2021. Results to QA for review.

Completion Date: 03/01/2021

Document Submission

Implemented

Random weekly apartment temperature checks completed and attached.

Monthly Boiler systems check attached.

127a - Portable Space Heaters

1. Requirements

2600.

127.a. Portable space heaters are prohibited.

Description of Violation

On 12/18/20 and 12/19/20 portable space heaters were used in rooms

[REDACTED]
[REDACTED]
[REDACTED], and [REDACTED].

127a - Portable Space Heaters (*continued*)

Plan of Correction

Accept

Portable space heaters have been removed from all apartments.

Administrator / Designee will educate all departments regarding the prohibited use of space heaters 2/19/2021.

Maintenance Director / Designee will conduct random apartment checks weekly to ensure portable space heaters are not being utilized. Audits will be conducted weekly times 4 weeks then monthly times two months. First audit completion date 2/19/2021.

Completion Date 02/22/2021

Document Submission

Implemented

Education completed regarding the prohibited use of space heaters. Attached

Weekly room audits to ensure compliance regarding the prohibited use of space heaters attached.