

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

March 23, 2023

[REDACTED]
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 [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/31/2023 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,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: ST. MARTHA VILLA FOR INDEPENDENT & RETIREMENT LIVING License #: 14108 License Expiration: 11/03/2023

Address: 490 MANOR AVENUE, DOWNINGTOWN, PA 19335

County: CHESTER

Region: SOUTHEAST

Administrator

Name: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Legal Entity

Name: 470 MANOR OPERATING LLC

Address: 490 MANOR AVENUE, DOWNINGTOWN, PA, 19335

Phone: [REDACTED]

Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff:

Total Daily Staff: 80

Waking Staff: 60

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Complaint, Monitoring

Exit Conference Date: 01/31/2023

Inspection Dates and Department Representative

01/31/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 135

Residents Served: 50

Secured Dementia Care Unit

In Home: Yes

Area: SDCU

Capacity: 35

Residents Served: 26

Hospice

Current Residents: 4

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 50

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 30

Have Physical Disability: 0

Inspections / Reviews

01/31/2023 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 02/18/2023

02/21/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 03/21/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 03/20/2023

Inspections / Reviews *(continued)*

03/23/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/21/2023

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

103g - Storing Food

1. Requirements

2600.
103.g. Food shall be stored in closed or sealed containers.

Description of Violation

On 1/31/23 at 2:52PM, there was an uncovered tray of shrimp in the walk-in refrigerator.

Plan of Correction

Accept (MS - 02/16/2023)

An education on the regulation will begin on 2/13/23 and be complete by 3/13/23. All dietary staff members on the schedule from the start of the education until the proposed completion date will be educated. All new hires for the dietary department during this time will be educated during their first week of training on the regulation. The administrator will give this education. An audit will be completed 2x per week for 8 weeks by the executive chef of the kitchen to make sure there is no uncovered food/unsealed containers of food present. This audit will begin on 2/15/23 and be complete by 4/10/23.

Licensee's Proposed Overall Completion Date: 04/10/2023

Implemented (MS - 03/23/2023)

103i - Outdated Food

2. Requirements

2600.
103.i. Outdated or spoiled food or dented cans may not be used.

Description of Violation

On 1/31/23 at 2:55PM, there were a bag of sausage patties, a bag of French fries, and shrimp wrapped in saran wrap in walk in freezer that were undated and unlabeled.

Repeated Violation date: 9/9/21, et al

Plan of Correction

Accept (MS - 02/21/2023)

An education on the regulation will begin on 2/13/23 and be complete by 3/13/23. All dietary staff members on the schedule from the start of the education to the proposed completion date will be educated. All new hires for the dietary department during this time will be educated during their first week of training on the regulation. This education will be given by the administrator. An audit will be completed 2x per week for 8 weeks by the Executive Chef ensuring all food in the refrigerators and freezer in kitchen are dated. This audit will begin on 2/15/23 and be complete on 4/10/23.

Licensee's Proposed Overall Completion Date: 04/10/2023

Implemented (MS - 03/23/2023)

183a - Original Containers and Injections

3. Requirements

2600.
183.a. Prescription medications, OTC medications and CAM shall be kept in their original labeled containers and may not be removed more than 2 hours in advance of the scheduled administration. Assistance with insulin and epinephrine injections and sterile liquids shall be provided immediately upon removal of the medication from its container.

183a - Original Containers and Injections (continued)**Description of Violation**

On 1/31/23 at 2:15PM, there was 1 circular white pill loose in the 2nd floor medication cart 2.

Plan of Correction**Accept (MS - 02/21/2023)**

An education on the regulation will be provided to all nursing staff on the schedule from the start of the education to the proposed completion date. This education will begin on 2/13/23 and be complete by 3/13/23. All new hires for nurses/med techs during this time will be given the education. This education will be given by the administrator. An audit 1x per day x4 weeks of each cart will be completed by each nurse/med tech each shift to check for loose pills. This audit will begin on 2/20/23 and be complete on 3/20/23.

Licensee's Proposed Overall Completion Date: 03/20/2023

Implemented (MS - 03/23/2023)**183d - Prescription Current****4. Requirements**

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

On 1/31/23, trazadone 50mg belonging to resident 1, was in the home's medication cart; however, there is no current order for this medication and the home stated they never had an order for it.

Plan of Correction**Accept (MS - 02/21/2023)**

An education on the regulation will be provided to all nurses and med techs on the schedule from the start of the education until the proposed completion date. This education will begin on 2/15/23 and be complete on 3/15/23. All new hires for nurses/med techs during this time will be given the education. This education will be given by the administrator. An audit of each cart 1x per week for 4 weeks will be completed by the clinical director or designee to ensure all medications in the cart have a matching order. This audit will begin on 2/19/23 and be complete on 3/19/23.

Licensee's Proposed Overall Completion Date: 03/19/2023

Implemented (MS - 03/23/2023)**184a - Resident's Meds Labeled****5. Requirements**

2600.

184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

Description of Violation

Resident 1 is prescribed Colace capsule 100mg give 1 tablet by mouth in the morning. However, the medication label reads give 1 capsule by mouth twice daily.

Resident 2 is prescribed Lorazepam Tablet .5mg give 1 tablet by mouth every 12 hours as needed. However, the medication label reads give 1 tablet by mouth twice a day as needed.

Resident 2 is prescribed Seroquel Oral Tablet 50mg give 1 tablet by mouth two times a day. However, the medication label reads give 1 tablet by mouth every 12 hours.

184a - Resident's Meds Labeled (*continued*)**Plan of Correction****Accept (MS - 02/21/2023)**

An education will be provided to all nurses and med techs on the schedule from the start of the education until the proposed completion date. This education will begin on 2/15/23 and be complete by 3/15/23. All new hires for nurses/med techs during this time will be given the education. This education will be given by the administrator. An audit will be completed 1x per week x4 weeks of every cart to ensure that each medication's label matches the order in the MAR. This audit will begin on 2/19/23 and be complete on 3/19/23. This audit will be completed by the clinical director or designee.

Licensee's Proposed Overall Completion Date: 03/19/2023

Implemented (MS - 03/23/2023)

184b - Labeling OTC/CAM

6. Requirements

2600.

184.b. If the OTC medications and CAM belong to the resident, they shall be identified with the resident's name.

Description of Violation

On 1/31/23 at 2:15PM, Aspirin 81mg belonging to resident 1 was in the 2nd floor medication cart 2 and was not labeled with the resident's name or room number.

Plan of Correction**Accept (MS - 02/21/2023)**

An education will be provided to all nurses/med techs on the schedule from the start date of the education until the proposed end date. All new hires for nurses/med techs during this time will be given this education. This education will be given by the administrator. This education will begin on 2/15/23 and be complete by 3/15/23. An audit 1x per week for 4 weeks of each cart will be completed by the clinical director or designee to ensure that every OTC medication in each cart has a label with the resident's name. This audit will begin on 2/19/23 and be complete on 3/19/23.

Licensee's Proposed Overall Completion Date: 03/19/2023

Implemented (MS - 03/23/2023)

187d - Follow Prescriber's Orders

7. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident 1 is prescribed Acetaminophen tablet 325mg-give two tablets by mouth two times a day. However on 1/31/23, this medication was not available in the home.

Plan of Correction**Accept (MS - 02/21/2023)**

An education will be provided to all nurses/med techs on the schedule from the start date of the education until the proposed end date. All new hires for nurses/med techs during this time will be given this education. This education will be given by the administrator. This education will begin on 2/15/23 and be complete by 3/15/23. An audit 1x per week for 4 weeks of each cart will be completed by the clinical director or designee to ensure that every PRN medication is available that we have an order for in the MAR. This audit will begin on 2/19/23 and end on 3/19/23.

Licensee's Proposed Overall Completion Date: 03/19/2023

187d - Follow Prescriber's Orders (*continued*)*Implemented (MS - 03/23/2023)*

227g -Support Plan Signatures

8. Requirements

2600.

227.g. Individuals who participate in the development of the support plan shall sign and date the support plan.

Description of Violation

Resident 3 participated in the development of his/her support plan on [REDACTED]. However, the resident did not sign the support plan. Additionally refusal to sign or unable to sign are not indicated.

Plan of Correction*Accept (MS - 02/21/2023)*

An audit of all resident files will be completed to ensure that both the resident and the assessor signed the support plan. If the resident cannot sign the support plan, the auditor will check to make sure it is indicated so. This audit will be complete by the administrator. This audit will begin on 2/15/23 and be completed by 3/15/23. An additional audit will be completed 1x per week for 4 weeks to ensure that all support plans completed during this time are signed by the resident and assessor. If the resident cannot sign the auditor will make sure that it is indicated so. This audit will be completed by the Clinical Director. This audit will begin on 2/20/23 and be complete on 3/20/23. An education will be provided to the administrator and clinical director on the regulation. This education will begin on 2/16/23 and be completed same day.

Licensee's Proposed Overall Completion Date: 03/20/2023*Implemented (MS - 03/23/2023)*