

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

June 14, 2023

[REDACTED], EXECUTIVE DIRECTOR  
450 EAST PHILADELPHIA AVENUE OPERATIONS LLC  
450 EAST PHILADELPHIA AVENUE  
SHILLINGTON, PA, 19607

RE: MIFFLIN COURT  
450 EAST PHILADELPHIA AVENUE  
SHILLINGTON, PA, 19607  
LICENSE/COC#: 22206

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/09/2023, 05/10/2023 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: *MIFFLIN COURT* License #: *22206* License Expiration: *04/02/2024*  
 Address: *450 EAST PHILADELPHIA AVENUE, SHILLINGTON, PA 19607*  
 County: *BERKS* Region: *NORTHEAST*

**Administrator**

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

**Legal Entity**

Name: *450 EAST PHILADELPHIA AVENUE OPERATIONS LLC*  
 Address: *450 EAST PHILADELPHIA AVENUE, SHILLINGTON, PA, 19607*  
 [REDACTED] [REDACTED] [REDACTED] [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *10/03/1997* Issued By: *PA L&I*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *73* Waking Staff: *55*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Incident* Exit Conference Date: *05/10/2023*

**Inspection Dates and Department Representative**

*05/09/2023 - Off-Site* [REDACTED]  
*05/10/2023 - Off-Site* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *67* Residents Served: *55*

**Secured Dementia Care Unit**  
 In Home: *Yes* Area: *1st floor* Capacity: *14* Residents Served: *14*

**Hospice**  
 Current Residents: *2*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *55*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *18* Have Physical Disability: *0*

**Inspections / Reviews**

**05/09/2023 Partial**  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *06/01/2023*

**05/30/2023 - POC Submission**  
 Submitted By: [REDACTED] Date Submitted: *06/13/2023*  
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *06/05/2023*

Inspections / Reviews *(continued)*

06/14/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/13/2023

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

15a - Resident Abuse Report

1. Requirements

2600.

15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

On [redacted] at [redacted], staff heard Resident #1 scream. When they responded, Resident #2 was found in the room. Resident #1 told staff that Resident #2 struck him/her. Resident #2 was removed from the room. The incident was not reported to the Area Agency on Aging until [redacted] when a bruise was noted on Resident #1's chest.

Plan of Correction

Accept ([redacted] - 05/30/2023)

This incident was not witnessed by staff, there was confusion at the time as to what extent physical contact was made, if any. Residents' #1 door was kept closed. Staff in-servicing about immediate reporting for any suspected resident to resident incident was completed. Act 13 and Bureau of Human Services Licensing Incident Reporting. Please find attached forms included for staff in-servicing.

Licensee's Proposed Overall Completion Date: 05/30/2023

Implemented ([redacted] - 06/14/2023)

16c - Written Incident Report

2. 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 [redacted] at [redacted], staff heard Resident #1 scream. When they responded, Resident #2 was found in the room. Resident #1 told staff that Resident #2 struck him/her. Resident #2 was removed from the room. The incident was not reported to the Department until 2/22/23 when a bruise was noted on Resident #1's chest.

Plan of Correction

Accept ([redacted] - 05/30/2023)

This incident was not witnessed by staff, there was confusion at the time as to what extent physical contact was made, if any. Residents' #1 door was kept closed. Staff in-servicing about immediate reporting for any suspected resident to resident incident was completed. Act 13 and Bureau of Human Services Licensing Incident. Please find attached forms included in in-servicing.

Licensee's Proposed Overall Completion Date: 05/30/2023

Implemented ([redacted] - 06/14/2023)