

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

June 6, 2023

[REDACTED]  
HUMANGOOD PENNSYLVANIA  
[REDACTED]

RE: THE MANSION AT ROSEMONT  
404 CHESWICK PLACE  
ROSEMONT, PA, 19010  
LICENSE/COC#: 17663

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/15/2023 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: *THE MANSION AT ROSEMONT*      License #: *17663*      License Expiration: *06/07/2023*

Address: *404 CHESWICK PLACE, ROSEMONT, PA 19010*

County: *DELAWARE*      Region: *SOUTHEAST*

**Administrator**

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

**Legal Entity**

Name: *HUMANGOOD PENNSYLVANIA*

Address: [REDACTED]

Phone: [REDACTED]      Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *I-1*      Date: *03/23/2023*      Issued By: *Radnor Township*

**Staffing Hours**

Resident Support Staff:      Total Daily Staff: *91*      Waking Staff: *68*

**Inspection Information**

Type: *Partial*      Notice: *Announced*      BHA Docket #:

Reason: *Monitoring*      Exit Conference Date: *05/15/2023*

**Inspection Dates and Department Representative**

05/15/2023 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *221*      Resident Served: *77*

**Secured Dementia Care Unit**

In Home: *Yes*      Area: *SDCU*      Capacity: *17*      Resident Served: *0*

**Hospice**

Current Resident : *4*

**Number of Residents Who:**

Receive Supplemental Security Income: *0*      Are 60 Years of Age or Older: *77*

Diagnosed with Mental Illness: *0*      Diagnosed with Intellectual Disability: *0*

Have Mobility Need: *14*      Have Physical Disability: *0*

**Inspections / Reviews**

05/15/2023    Partial

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

Inspections / Reviews (*continued*)

## 05/30/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/01/2023

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 06/04/2023

## 05/31/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/01/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission

Follow-Up Date: 06/30/2023

## 06/06/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/01/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

## 91 - Telephone Numbers

### 1. Requirements

2600.

91. Emergency Telephone Numbers - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

### Description of Violation

*On 5/15/23 at 10:12AM, there were no emergency telephone numbers to include the nearest hospital and fire department on or by the telephone in the SDCU Kitchen.*

### Plan of Correction

**Accept (█ - 05/31/2023)**

*Emergency telephone number sticker was placed on telephone on 5/15/23. Memory Support Manager or designee will conduct environmental rounds twice a month beginning 6/1/23 to check placement of emergency telephone number stickers through the neighborhood. Will report to QA monthly for the next six months or longer if sustained compliance not achieved.*

**Licensee's Proposed Overall Completion Date: 06/01/2023**

**Implemented (█ - 06/05/2023)**

## 103f - Refrigerator/Freezer Temps

### 2. Requirements

2600.

- 103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

### Description of Violation

*On 5/15/23 at 10:11AM the temperature in the refrigerator was 45 degrees Fahrenheit and at 10:36AM it was 45 degrees Fahrenheit.*

### Plan of Correction

**Accept (█ - 05/31/2023)**

*Refrigerator temperature has been adjusted to and reading at 40 degrees Fahrenheit on 5/16/23. Daily log in place to start 6/1/23. Memory Support Manager or /designee will audit log monthly beginning 6/1/2023 and Will report to QA monthly for the next 6 months or longer if sustained compliance not achieved.*

**Licensee's Proposed Overall Completion Date: 06/01/2023**

**Implemented (█ - 06/05/2023)**

## 105g - Lint Removal and Duct Cleaning

### 3. Requirements

2600.

- 105.g. To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

### Description of Violation

*On 5/15/23 at 10:26AM, there was an large accumulation of lint across the lint trap of the dryer in the SDCU. There were no clothes in the dryer at the time.*

105g - Lint Removal and Duct Cleaning (*continued*)**Plan of Correction****Accept (MS - 05/31/2023)**

On 5/16/23 Nursing team has been educated on removing lint from dryer after every cycle. A sign was placed on the dryer to remind Nursing team to remove lint from dryer after every cycle also on 5/16/23. Memory Support Manager or designee will do spot checks weekly beginning 6/1/2023 and report findings to QA Monthly for the next 6 months or longer if sustained compliance not achieved.

Licensee's Proposed Overall Completion Date: 06/01/2023

**Implemented (█ - 06/05/2023)**

## 233c - Key-Locking Devices

**4. Requirements**

2600.

233.c. If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

**Description of Violation**

On 5/15/23 at 10:30AM, The directions for operating the home's locking mechanism were not conspicuously posted near the door by the kitchen of the Secure Dementia Care Unit (SDCU).

On 5/15/23 at 10:33AM, The directions for operating the home's locking mechanism were not conspicuously posted near the door at stair tower 6 of the Secure Dementia Care Unit (SDCU).

**Plan of Correction****Accept (█ - 05/31/2023)**

on 5/16/23 Community locking code for Memory support posted conspicuously near door by the kitchen and stair tower 6. Memory Support Manager or designee will conduct environmental rounds twice a month to ensure posted beginning 6/1/23 and Will report to QA monthly for six months or longer if sustained compliance not achieved.

Licensee's Proposed Overall Completion Date: 06/01/2023

**Implemented (█ - 06/05/2023)**