

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

March 21, 2024

[REDACTED]
DEER MEADOWS OPERATING II LLC
[REDACTED]

RE: DEER MEADOWS RESIDENCES
8301 ROOSEVELT BOULEVARD
PHILADELPHIA, PA, 19152
LICENSE/COC#: 14126

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/08/2024 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: *DEER MEADOWS RESIDENCES* License #: *14126* License Expiration: *12/01/2024*
Address: *8301 ROOSEVELT BOULEVARD, PHILADELPHIA, PA 19152*
County: *PHILADELPHIA* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *DEER MEADOWS OPERATING II LLC*
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-2* Date: *10/14/2010* Issued By: *City of Philadelphia, L&I*

Staffing Hours

Resident Support Staff: Total Daily Staff: *96* Waking Staff: *72*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *New* Exit Conference Date: *02/08/2024*

Inspection Dates and Department Representative

02/08/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *182* Residents Served: *66*

Secured Dementia Care Unit

In Home: *Yes* Area: *Bear 5* Capacity: *20* Residents Served: *19*

Hospice

Current Residents: *na*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *66*
Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *30* Have Physical Disability: *0*

Inspections / Reviews

02/08/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/14/2024*

03/19/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: *03/19/2024*
Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *03/21/2024*

Inspections / Reviews *(continued)*

03/21/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/19/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

88a - Surfaces

1. Requirements

2600.

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

Description of Violation

On [redacted] a retractable gate was mounted in the resident dining room of the proposed new Secured Dementia Care Unit (SDCU). The gate was meant to keep residents safe from heated materials, IE: electric steam table. This gate presents several hazards such as resident climbing over the gate or getting an appendage or digit caught within the gate.

Plan of Correction

Accept [redacted] 03/19/2024)

Upon recognition of violation 2600.88(A) retractable gate was removed. Electric Steam table hazard was also removed as it was deemed unnecessary for meal services. (Item 1, Photo attached).

Licensee's Proposed Overall Completion Date: 03/14/2024

Implemented [redacted] - 03/19/2024)

89b - Hot Water Temperature

2. Requirements

2600.

89.b. Hot water temperature in areas accessible to the resident may not exceed 120°F.

Description of Violation

On [redacted], at [redacted] the hot water temperature at the bathroom sink of room [redacted] measured 125.7 degrees Fahrenheit and at [redacted] it was 110.1 degrees Fahrenheit.

Plan of Correction

Accept [redacted] - 03/19/2024)

Upon recognition of violation 2600.89(B) Director of Plant Operations immediately made adjustment to boiler, as noted water temperature was recorded 1 hour later at 110.1 degrees Fahrenheit. Plant Operations Department continued to take and record daily water temperatures for 1 month after. (Item 2 attached).

Proposed Overall Completion Date: 03/14/2024

Licensee's Proposed Overall Completion Date: 03/14/2024

Implemented [redacted] - 03/19/2024)

90a - Landline Telephone

3. Requirements

2600.

90.a. The home shall have a working, noncoin operated, landline telephone that is accessible in emergencies and accessible to individuals with disabilities.

Description of Violation

The home does not have a working, non-coin-operated landline telephone in the proposed new SDCU.

Plan of Correction

Accept [redacted] - 03/19/2024)

Upon recognition of violation 2600.90(A) Administrator immediately, while DHS inspector still on site, had physical phone installed by Director on Plant Operations. Phone line was working and operational.

Proposed Overall Completion Date: 03/14/2024

90a - Landline Telephone (continued)

Licensee's Proposed Overall Completion Date: 03/14/2024

Implemented [REDACTED] 03/19/2024)

91 - Telephone Numbers

4. 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

There are no emergency telephone numbers to include the nearest hospital and fire Department posted in the proposed new SDCU.

Plan of Correction

Accept [REDACTED] - 03/19/2024)

Upon recognition of violation 2600.91 Administrator immediately, while DHS inspector still on site, had physical phone installed by Director on Plant Operations. Phone line was working and operational. Emergency numbers were attached to physical phone. Emergency phone numbers were also found to be posted at the nurses station on the unit.

Proposed Overall Completion Date: 03/14/2024

Licensee's Proposed Overall Completion Date: 03/14/2024

Implemented [REDACTED] 03/19/2024)

96a - First Aid Kit

5. Requirements

2600.

96.a. The home shall have a first aid kit that includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers.

Description of Violation

The first aid kit in the nursing station does not include a thermometer.

Plan of Correction

Accept [REDACTED] - 03/19/2024)

Upon recognition of violation 2600.96(a), thermometer missing from 3rd floor first aid kit, thermometer were replaced immediately, ongoing monthly audit of first aid kits to be completed by Residential Health Center Coordinator or designee.

Staff was educated that when a first aid kit is used, Administrator, Coordinator or designee must be notified to ensure items used in first aid kit are replaced. (Attached Item 3)

Proposed Overall Completion Date: 03/14/2024

Licensee's Proposed Overall Completion Date: 03/14/2024

Implemented [REDACTED] - 03/19/2024)