

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

April 29, 2024

[REDACTED]
THREE READING, LP

[REDACTED]
C/O HERITAGE SENIOR LIVING
[REDACTED]

RE: THE MANOR AT MARKET SQUARE
803 PENN STREET
READING, PA, 19601
LICENSE/COC#: 20589

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/12/2024 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: *THE MANOR AT MARKET SQUARE* License #: *20589* License Expiration: *10/20/2024*
 Address: *803 PENN STREET, READING, PA 19601*
 County: *BERKS* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *THREE READING, LP*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-2* Date: *05/31/2019* Issued By: *City of Reading*
 Type: *C-2 LP* Date: *08/01/2000* Issued By: *DLI*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *80* Waking Staff: *60*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: *03/12/2024*

Inspection Dates and Department Representative

03/12/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *80* Residents Served: *67*

Secured Dementia Care Unit
 In Home: *Yes* Area: *SDCU* Capacity: *18* Residents Served: *13*

Hospice
 Current Residents: *7*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *0*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *13* Have Physical Disability: *0*

Inspections / Reviews

03/12/2024 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *04/12/2024*

04/22/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *04/26/2024*
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *04/24/2024*

Inspections / Reviews *(continued)*

04/29/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/26/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

141a 1-10 Medical Evaluation Information

1. Requirements

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:

1. A general physical examination by a physician, physician's assistant or nurse practitioner.
2. Medical diagnosis including physical or mental disabilities of the resident, if any.
3. Medical information pertinent to diagnosis and treatment in case of an emergency.
4. Special health or dietary needs of the resident.
5. Allergies.
6. Immunization history.
7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
8. Body positioning and movement stimulation for residents, if appropriate.
9. Health status.
10. Mobility assessment, updated annually or at the Department's request.

Description of Violation

Resident [REDACTED] Documentation of Medical Evaluation dated [REDACTED] is not complete. The section of Medical Information Pertinent to Diagnosis and Treatment is blank, there is no indication it was reviewed during the process.

Resident [REDACTED] Documentation of Medical Evaluation dated [REDACTED] is not complete. The section of Medical Information Pertinent to Diagnosis and Treatment is blank, there is no indication it was reviewed during the process.

Plan of Correction**Accept [REDACTED] - 04/22/2024)**

Immediate Corrective Actions: On 3/13/24, Resident Care Director received orders from MD to correct the noted DMEs.

Additional Corrective Actions: On 3/13/24, the Resident Care Director began auditing all resident's DMEs. By 4/15/24, the audit of all current DMEs will be completed and all necessary changes and MD orders will be obtained.

Ongoing Quality Assurance Actions: The Resident Care Director and Executive Director will do 30 day chart audits on all new residents as well as an annual audit on all existing residents. This began 3/13/24 and will be ongoing. Concerns, patterns, and trends will be reviewed at the quarterly QA meeting.

Licensee's Proposed Overall Completion Date: 04/15/2024

Implemented [REDACTED] - 04/29/2024)