

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

January 24, 2025

[REDACTED]
HUMANGOOD PENNSYLVANIA
[REDACTED]

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

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/18/2024 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 MANSION AT ROSEMONT License #: 17663 License Expiration: 06/07/2025
 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
 Type: Other Date: 10/12/2007 Issued By: Radnor Township

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 104 Waking Staff: 78

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Monitoring Exit Conference Date: 11/18/2024

Inspection Dates and Department Representative

11/18/2024 On Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 227 Residents Served: 78

Secured Dementia Care Unit
 In Home: Yes Area: Capacity: 18 Residents Served: 16
 Memory Care Neighborhood

Hospice
 Current Residents: 1

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 78
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 26 Have Physical Disability: 0

Inspections / Reviews

11/18/2024 - Partial
 Lead Inspector: [REDACTED] Follow Up Type: POC Submission Follow Up Date: 12/27/2024

Inspections / Reviews (*continued*)

12/30/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/17/2025

Reviewer: [REDACTED]

Follow Up Type: POC Submission

Follow Up Date: 01/03/2025

12/31/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/17/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 01/17/2025

01/24/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/17/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

82c - Locking Poisonous Materials

1. Requirements

2600.

82.c. Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

Description of Violation

Due to a broken lock of the bathroom vanity sink in room 170, several toiletry items including a tube of Colgate Cavity Protection Toothpaste, with a manufacturer's label indicating "If more than used for brushing is accidentally swallowed, get medical help or contact a Poison Control Center right away", was unlocked, unattended, and accessible to residents of the memory care neighborhood. Not all the residents of the memory care neighborhood have been assessed as capable to safely use and avoid poisonous materials.

Repeat Violation: [REDACTED]

Plan of Correction

Accept [REDACTED] - 12/31/2024)

On the day of inspection, all items were removed from the unlocked cabinet and securely stored in a designated locked area. The resident cabinet was replaced with a new lock. Staff members were notified of the violations, and staff training will be scheduled during the week of 1/6/25 by Personal Care administrator to educate them on the importance of securing poisonous materials. Memory Support Manager or designee will conduct weekly audits of storage areas starting 1/2/25 for the next three months or longer if not in compliance to ensure compliance and report to Quality Management monthly.

Proposed Overall Completion Date: 01/17/2025

Licensee's Proposed Overall Completion Date: 01/17/2025

Implemented [REDACTED] - 01/24/2025)

85a - Sanitary Conditions

2. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

On [REDACTED], at approximately 2:45 pm, a shower chair with feces on the seat was observed in the shower of resident room [REDACTED].

Plan of Correction

Accept [REDACTED] - 12/31/2024)

The shower chair was removed from the apartment and cleaned on the inspection day. Staff training will be scheduled during the week of 1/6/25 by the Personal Care administrator to educate staff members on proper sanitation practices and the importance of immediate response to sanitation issues. Memory Support Manager or designee will conduct a daily sanitation checklist audit starting on 1/2/25 to ensure that all equipment, including shower chairs, is free from sanitation issues for the next three months or longer if not in compliance and report to Quality Management monthly.

Proposed Overall Completion Date: 01/17/2025

Licensee's Proposed Overall Completion Date: 01/17/2025

Implemented [REDACTED] - 01/24/2025)

185a Implement Storage Procedures

3. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

On [REDACTED], a bottle of prescription strength Selsun Blue Shampoo, prescribed to resident [REDACTED], was found unsecured under the resident's bathroom sink.

Plan of Correction

Accept [REDACTED] - 12/31/2024)

On the day of inspection, prescription medication was removed from the sink and secured correctly in the designated medication storage area. The personal care administrator will schedule staff training during the week of 1/6/25 to educate the staff on medication management policies and the importance of securely storing medications. Starting 1/2/25, the memory Support manager will conduct weekly apartment audits to ensure medication storage practices are followed for the next three months or longer if not in compliance. The manager will report to Quality Management monthly.

Licensee's Proposed Overall Completion Date: 01/17/2025

Implemented ([REDACTED] 01/24/2025)

187a Medication Record

4. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

Description of Violation

Resident [REDACTED] has a prescription for [REDACTED] grams daily; to shoulders and back of neck.

Resident [REDACTED] file has an undated medical note from Holisticare Hospice listing [REDACTED] - apply 2 grams to both shoulders and back of neck daily in AM - pain". Other medications with instructions are also listed on this note. The note is not signed, the resident is no longer on hospice.

An [REDACTED] Progress Note for the resident states "Resident refused [REDACTED] Resident stated that they prefer [REDACTED] at night. Order change to night time."

However, the instructions for this medication according to the resident's November 2024 medication administration record (MAR) read:

"Apply to both shoulders, back neck topically at bedtime related to PAIN, UNSPECIFIED (R52)" and

"Apply 2 grams to both shoulders and back of neck in AM, per Hospice".

Repeat Violation: [REDACTED]

Plan of Correction

Accept [REDACTED] - 12/31/2024)

The resident was seen by the physician on 11/22. The medication orders were reviewed with the PCP, and orders were to discontinue [REDACTED]; new orders were obtained. The medication was removed and destroyed per community policy. Staff training will be scheduled during the week of 1/6/25 by the personal care administrator to educate the staff on proper medication administration protocols and the importance of verifying orders and checking proper labeling. The personal care manager or designee will conduct weekly cart audits starting 1/2/25 for the next three months or longer if not in compliance and report to Quality Management monthly.

Licensee's Proposed Overall Completion Date: 01/17/2025

187a - Medication Record (continued)

Implemented [redacted] - 01/24/2025)

187d - Follow Prescriber's Orders

5. Requirements

2600.

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

Description of Violation

Resident [redacted] is prescribed [redacted] - 2 grams daily; to shoulders and back of neck. However, resident [redacted] was administered this medication on [redacted] at 20:38 to "Hip - right" according to the resident's November 2024 Location of Administration Report.

Repeat Violation: [redacted]

Plan of Correction

Accept [redacted] - 12/31/2024)

The team member was educated on following physician orders. Staff training will be scheduled during the week of 1/6/25 by the personal care administrator to educate staff on the current medication administration policy and the proper techniques for verifying the correct application and site of topical gels. The personal Care Manager will conduct random weekly audits of the Medication administration record of one resident per floor to ensure proper documentation of the topical medication application site for the next three months or longer if the resident is not in compliance. The manager will report to Quality Management monthly.

Proposed Overall Completion Date: 01/17/2025

Licensee's Proposed Overall Completion Date: 01/17/2025

Implemented [redacted] - 01/24/2025)