

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

January 28, 2025

[REDACTED] ADMINISTRATOR
MARTINS RUN, INC.
100 HALCYON DRIVE
MEDIA, PA, 19063

RE: WESLEY ENHANCED LIVING MAIN
LINE PERSONAL CARE
100 HALCYON DRIVE
MEDIA, PA, 19063
LICENSE/COC#: 18280

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/25/2024, 11/26/2024 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: WESLEY ENHANCED LIVING MAIN LINE PERSONAL CARE License #: 18280 License Expiration: 09/11/2025
 Address: 100 HALCYON DRIVE, MEDIA, PA 19063
 County: DELAWARE Region: SOUTHEAST

Administrator

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

Legal Entity

Name: MARTINS RUN, INC.
 Address: 100 HALCYON DRIVE, MEDIA, PA, 19063
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 04/11/1996 Issued By: PA Dept of L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 29 Waking Staff: 22

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
 Reason: Renewal Exit Conference Date: 11/26/2024

Inspection Dates and Department Representative

11/25/2024 - On-Site: [REDACTED]
 11/26/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 59 Residents Served: 29

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 29
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

11/25/2024 - Full

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 12/30/2024

Inspections / Reviews (*continued*)

12/27/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: 01/14/2025
Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 01/01/2025

01/06/2025 - POC Submission

Submitted By: [REDACTED] Date Submitted: 01/14/2025
Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 01/17/2025

01/28/2025 - Document Submission

Submitted By: [REDACTED] Date Submitted: 01/14/2025
Reviewer: [REDACTED] Follow-Up Type: Not Required

85a - Sanitary Conditions

1. Requirements

2600.
85.a. Sanitary conditions shall be maintained.

Description of Violation

On 11/26/2024, at approximately 10:45 AM, a strong odor of urine was present in the hallway outside room 119. A urine odor was also present in the bathroom of room 103 at approximately 10:50 AM, and in the bathroom of room 121 at approximately 10:55 AM.

Plan of Correction

Directed () - 01/06/2025

PCHA, remains unclear of how to provide plan of correction for this violation. Was advised during inspection there were no urine odor. There were no unsanitary conditions noted. All universal precautions were followed.

Directed Plan of Correction:

Immediately: A designated staff person shall monitor the home at least daily to ensure sanitary conditions are maintained. Documentation of monitoring shall be kept for Department review.

Within 10 days of receipt of the plan of correction: All staff persons shall be re-educated on maintaining sanitary conditions including immediately correcting or reporting any unsanitary conditions. Documentation of education shall be kept in accordance with 2600.65i.

Directed Completion Date: 01/16/2025

Implemented () - 01/28/2025

85e - Trash Outside Home

2. Requirements

2600.
85.e. Trash outside the home shall be kept in covered receptacles that prevent the penetration of insects and rodents.

Description of Violation

On 11/26/2024, a discarded armchair and fragments of a boxspring were lying uncovered next to the dumpster on the grounds behind the home.

Plan of Correction

Accept () - 01/06/2025

PCHA and Facilities director, has removed armchair and boxspring, items were properly disposed of inside of the dumpster, also facilities director will conduct daily audits to ensure no trash will be placed/left outside of the home. All construction staff will be in-serviced by facilities director to ensure they are educated on the proper procedures of disposing unwanted furniture. Facilities director will complete education training as of 1/5/2025. Daily audits started on 12/27/2024.

Licensee's Proposed Overall Completion Date: 12/31/2024

Implemented () - 01/28/2025

102d - Grab/Hand/Assist Bar/Slip-Resistant Surface

3. Requirements

2600.

102d - Grab/Hand/Assist Bar/Slip-Resistant Surface (continued)

102.d. Toilet and bath areas must have grab bars, hand rails or assist bars. Bathtubs and showers must have slip-resistant surfaces.

Description of Violation

On 11/26/2024 at approximately 11:00 AM, the bathroom in room 114 did not have a bathmat or other slip-resistant surface.

Plan of Correction

Accept (█ - 01/06/2025)

On 11/26/2024 PCHA has ensured that resident in room 114 has a bathmat. PCHA, has also conducted an audit for every resident's room on the unit to ensure that every resident has a bathmat. PCHA has also conducted and in-service along with education to all Personal Care and Housekeeping staff the importance of resident's safety, in-service was implemented on 12/5/2024. PCHA will continue to conduct daily audit to ensure bathmat remain present in resident bathroom. This will be completed by 1/5/2025.

Licensee's Proposed Overall Completion Date: 12/31/2024

Implemented (█ - 01/28/2025)