

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

October 23, 2026

[REDACTED], OWNER/ADMINISTRATOR
RICHARDSON GROUP SENIOR CITIZENS LIVING QUARTER INC
1750 BRIDGE STREET
PHILADELPHIA, PA, 19124

RE: RICHARDSON GROUP SENIOR
CITIZENS LIVING QUARTER
1750 BRIDGE STREET
PHILADELPHIA, PA, 19124
LICENSE/COC#: 10051

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/17/2026 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: RICHARDSON GROUP SENIOR CITIZENS LIVING QUARTER**License #:** 10051**License Expiration:** 08/27/2027**Address:** 1750 BRIDGE STREET, PHILADELPHIA, PA 19124**County:** PHILADELPHIA**Region:** SOUTHEAST

Administrator

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

Legal Entity

Name: RICHARDSON GROUP SENIOR CITIZENS LIVING QUARTER INC**Address:** 1750 BRIDGE STREET, PHILADELPHIA, PA, 19124**Phone:** [REDACTED]**Email:** [REDACTED]

Certificate(s) of Occupancy

Type: R-3**Date:** 01/19/2011**Issued By:** City of Philadelphia

Staffing Hours

Resident Support Staff: 0**Total Daily Staff:** 4**Waking Staff:** 3

Inspection Information

Type: Full**Notice:** Unannounced**BHA Docket #:****Reason:** Renewal**Exit Conference Date:** 08/17/2026

Inspection Dates and Department Representative

08/17/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 4**Residents Served:** 4

Secured Dementia Care Unit

In Home: No**Area:****Capacity:****Residents Served:**

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 4**Are 60 Years of Age or Older:** 4**Diagnosed with Mental Illness:** 4**Diagnosed with Intellectual Disability:** 1**Have Mobility Need:** 0**Have Physical Disability:** 0

Inspections / Reviews

08/17/2026 Full

Lead Inspector: [REDACTED]**Follow-Up Type:** POC Submission**Follow-Up Date:** 08/31/2026

09/10/2026 - POC Submission

Submitted By: [REDACTED]**Date Submitted:** 10/22/2026**Reviewer:** [REDACTED]**Follow-Up Type:** Document Submission**Follow-Up Date:** 09/16/2026

Inspections / Reviews (*continued*)

10/23/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/22/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

18 Compliance With Laws

1. Requirements

2600.

18. Applicable Health and Safety Laws A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

According to the CARE FACILITY CARBON MONOXIDE ALARMS STANDARDS ACT - ENACTMENT Act of Jun. 23, 2016, Carbon monoxide alarms must be installed in proximity of, but not less than 15 feet from any fossil-fuel burning device or appliance.

On 08/17/26, there was no carbon monoxide detected within 15 feet of the heating unit and the water heater gas line.

Plan of Correction

Accept () - 09/10/2026)

In response to the violation on 08/17/2026 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 08/19/2026 by the Administrator to purchase a carbon monoxide detector. The carbon monoxide detector was placed within the required 15 feet of the appliances fossil-fuel (gas) supply lines. To enhance the currently compliant operations, on 08/27/2026 the staff will check annually to make sure the carbon monoxide is working correctly,

The administrator will maintain ongoing compliance with complying with applicable Federal, State and local laws, ordinances and regulations. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 08/27/2026

Implemented () - 10/23/2026)

20b6 Interest Bearing Account

2. Requirements

2600.

- 20.b. If the home provides assistance with financial management or holds resident funds, the following requirements apply:

6. If a home is holding more than \$200 for a resident for more than 2 consecutive months, the administrator shall notify the resident and offer assistance in establishing an interest bearing account in the resident's name at a local Federally insured financial institution. This does not include security deposits.

Description of Violation

The home held money for resident #1, from October 2025 to June 2026, during which time the balance of those funds did not fall below \$200. The home has not offered an interesting bearing account.

Plan of Correction

Accept () - 09/10/2026)

In response to the violation on 08/17/2026 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 08/18/2026 by the Administrator to speak to Resident#1 regarding holdings of funds in bank for \$200.00 or more. Administrator ask Resident#1 if () wanted to move () account to a interest bearing account and resident #1 did not want such account at this time. To enhance the currently compliant operations administrator will review Resident #1 file to make sure financials will not over ride the balance on all accounts. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 08/27/2026

20b6 Interest Bearing Account (continued)*Implemented () - 10/23/2026)***93a Handrails****3. Requirements**

2600.

93.a. Each ramp, interior stairway and outside steps must have a well secured handrail.

Description of Violation*The interior stairway has a handrail that is loose and poorly secured.***Plan of Correction***Accept () - 09/10/2026)*

In response to the violation on 08/17/2026 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 08/19/2026 by the Staff/Administrator to purchase the supplies to install and replace the broken handrail bracket. To enhance the currently compliant operations staff will continually monitor and maintenance any mechanical issues that maybe in need of repair. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 08/27/2026*Implemented () - 10/23/2026)***141b1 Annual Medical Evaluation****4. Requirements**

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident #1's most recent medical evaluation was completed on () The resident's previous medical evaluation was completed on ().

Resident #2's most recent medical evaluation was completed on () The resident's previous medical evaluation was completed on ().

Resident #3's most recent medical evaluation was completed on () The resident's previous medical evaluation was completed on ().

141b1 - Annual Medical Evaluation (continued)

Plan of Correction**Accept () - 09/10/2026)**

In response to the violation on 08/17/2026 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 08/25/2026 by the Administrator/Doctor to clarify the yearly medical evaluations to be prepared on the previous year of the last DME. Administrator spoke to the residents doctor regarding the DME's that was past due. Moving forward the doctor indicated will prepare all Resident's #1,2 and 3 medical evaluations as of the completions dates for 2027. To enhance the currently compliant operations, the three residents will have there DME's completed on or before the dates due. The administrator will perform two months in advance reviews of all DME's to maintain ongoing compliance. Any deficiencies will be corrected immediately reported to the doctor, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 08/27/2026**Implemented () - 10/23/2026)**

187a - Medication Record

5. 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 #2 is prescribed This medication is administered daily per resident #2 statement. However, it is not included on resident #2's medication administration record.

Resident #2 is prescribed . However, it is not included on resident #2's medication administration record.

Resident #3 is prescribed . However, it is not included on resident #3's medication administration record.

Repeated Violation 08/27/25**Plan of Correction****Accept () - 09/10/2026)**

In response to the violation on 08/17/2026 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 08/19/2026 by the Administrator/Staff to contact the pharmacy to make the corrections of adding the to the medication administration records. Med-tech and Administrator review new MAR and updated the medication sheet. To enhance the currently compliant operations on 8/19/26 the corrections were made by the pharmacy. The Med-Tech and Administrator will perform monthly reviews of all MAR's to maintain compliance and eliminate any deficiencies. Any findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 08/27/2026**Implemented () - 10/23/2026)**

187a - Medication Record (*continued*)

6. Requirements

2600.

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

12. Diagnosis or purpose for the medication, including pro re nata (PRN).

Description of Violation

Resident #4 is prescribed [REDACTED]. However, resident's August 2026 medication administration record does not indicate diagnosis or purpose for the medication, including pro re nata (PRN).

Plan of Correction

Accept ([REDACTED]) - 09/10/2026)

In response to the violation on 08/17/2026 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 08/19/2026 the Med Tech/Administrator contacted the pharmacy regarding adding on the MAR's, Resident #4 diagnosis on the medication sheet the purpose of the medication to include any PRN that is applicable. Moving forward the med-tech and administrator will review the MAR's to prevent any deficiencies that may occur.

To enhance the currently compliant operations, on 08/19/2026 the Med-Tech/Administrator will review all MAR's monthly to make sure the pharmacy has included all diagnosis, purpose of medications and any PRN that is needed to appear on the medication administration records, with a completion date 9/4/26.

Effective 08/19/2026 the med-techs will perform monthly checks of reviews, through 09/04/2026 to maintain ongoing compliance with keeping a medication record, for each resident for whom medications are administered, that includes, including diagnosis or purpose for the medication, including pro re nata (PRN). Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 09/04/2026

Implemented ([REDACTED]) - 10/23/2026)

187b - Date/Time of Medication Admin.

7. Requirements

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

Description of Violation

Resident #4 is prescribed [REDACTED] Resident #4's August 2026 medication administration record does not include the initials of the staff person who administered [REDACTED] on 08/15/26 at 8pm, on 08/16/26 at 8am and 8pm, and on 08/17/26 at 8am.

187b - Date/Time of Medication Admin. (continued)**Plan of Correction****Accept () - 09/10/2026)**

In response to the violation on 08/17/2026 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 08/17/2026 by the Med Tech to document the MAR with there initials for the administration of Resident #4 [REDACTED]. The Administrator will observed other residents med sheets for any deficiencies. To enhance the currently compliant operations, on 08/18/2026 the Med Tech will review all med sheets in the future for all initials and documentations as per each administration for any discrepancies, with a completion date of 08/27/2026. Effective immediately the Med Tech will perform daily checks to maintain ongoing compliance and any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 08/27/2026**Implemented () - 10/23/2026)**