

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to AUSTIN VIRGO, INC.

LEGAL ENTITY

To operate QUALITY ASSISTED CARE, INC.

NAME OF FACILITY OR AGENCY

Located at 3411 NORTH 17TH STREET, PHILADELPHIA, PA 19140

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

To provide Personal Care Homes

TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 15  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions: \_\_\_\_\_

This certificate is granted in accordance with the Public Welfare Code of 1967, P. L. 31, as amended, and Regulations

55 Pa. Code Chapter 2600: Personal Care Homes

(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from April 30, 2010 until April 30, 2011,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 193050

*Robert E. Robinson*

ISSUING OFFICER

*Kevin T. Casey*

DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable  
and should be posted in a conspicuous place in the facility.

PW 628 - 4/02



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE  
PO BOX 2675  
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

APR 30 2010

PHONE: (717) 783-3670  
FAX: (717) 783-5662

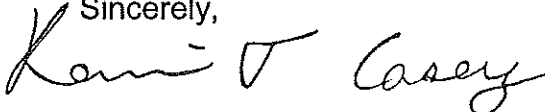
Mr. Austin Virgo, President/Administrator  
Austin Virgo, Inc.  
Quality Assisted Care, Inc.  
3411 North 17<sup>th</sup> Street  
Philadelphia, Pennsylvania 19140

Dear Mr. Virgo:

As a result of the Department of Public Welfare's licensing inspection on February 16, 2010 and April 20, 2010 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

Sincerely,  


Kevin T. Casey  
Deputy Secretary

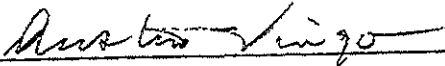
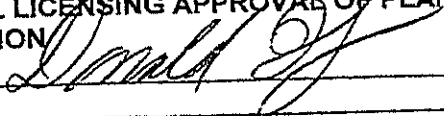
Enclosures  
License  
Violation Report

**VIOLATION REPORT**  
**PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

NAME AND ADDRESS OF PERSONAL CARE HOME Quality Assisted Care Inc. 3411 North 17 <sup>th</sup> Street, Philadelphia, PA 19140		CURRENT LICENSE NUMBER 193050
INSPECTION DATE(S) (Include all dates of the inspection) February 16, 2010		REGIONAL REPRESENTATIVE Christine McHale & Justin Trupp
SIGNATURE OF LEGAL ENTITY <i>Durkin King</i>	DATE 3/8/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>
		DATE 4/27/10


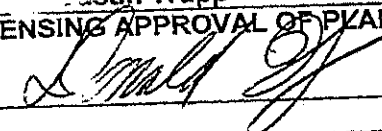
1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
16b The home shall develop and implement written policies and procedures on the prevention, reporting, notification, investigation and management of reportable incidents and conditions.	The home did not have a reportable incident policy.	2/17/10	The home did have a reportable incident policy but it was lacking certain information brought out by the Regional Representative. The home as now developed and have restated its reportable incident policy.  To assure continued compliance with this regulation the administrator will restudy the L.M.I and get clarification from regional representative.	4/29/10 SBS/A

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<b>SIGNATURE OF LEGAL ENTITY</b> 	<b>DATE</b> 3/8/10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 	<b>DATE</b> 4/27/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
20b9 A copy of the itemized account in 20b8 shall be kept in the resident's record.	Resident's #1 and #2 records did not contain a copy of the residents' itemized account.	2/16/10	Place itemized account record in Resident #1 and #2 folders  To assure continued compliance with this regulation, after marking the account administrator will place the account record immediately back in each resident folders	Steps have been taken to correct violation; full compliance is not verifiable 4/27/10 <u>SB5/LA</u> Date Initials (DPW)

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<b>SIGNATURE OF LEGAL ENTITY</b> 	<b>DATE</b> 3/8/10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> 
		<b>DATE</b> 4/27/10

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22a4, 227a  22a4 The following admission document shall be completed for each resident - Support plan developed and implemented within 30 days after admission.  227a A resident requiring personal care services shall have a written support plan developed and implemented within 30 days of admission to the home. The support plan shall be documented on the Department's support plan form.	Resident #1's assessment was completed on 5/6/09. Resident #1's support plan was completed on 5/1/09.	2/16/10	Upon New Admission Support Plan will be developed and implemented within 30 days after admission. Assessment and Support Plan will be done in a orderly fashion.  To assure continued compliance with this regulation staff and administration will follow check list for new admission requirement.  In the future all support plans will be completed based on assessments.	Steps have been taken to correct violation; full compliance is not verifiable Date 4/27/10 Initials (DPW) SAS/IA

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SIGNATURE OF LEGAL ENTITY <i>Dennis W. Vingo</i>	DATE 3/8/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 4/27/10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION/CLASS	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
41e A statement signed by the resident and, if applicable, the resident's designated person acknowledging receipt of a copy of the information specified in 41d, or documentation of efforts made to obtain signature, shall be kept in the resident's record.	Resident #3 did not have a signed copy of the resident rights.	2/17/10	Place a Resident Signed Copy of Resident right IN Resident # 3 Record Folder  To Assure Continued Compliance with This Regulation Administration will Review Resident Record - Monthly For Any Oversight	4/20/10 JBA

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		DATE 4/27/10

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65g Direct care staff persons, ancillary staff persons, substitute personnel and regularly-scheduled volunteers shall be trained annually in the following areas:  (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101—10225.5102). (5) Falls and accident prevention.	- Direct care staff member A, hired in 2000, did not complete training on the Older Adult Protective Services Act and Falls and accident prevention in 2009.  - Direct care staff member B, hired on 1/29/96, did not complete training on the Older Adult Protective Services Act and Falls and accident prevention in 2009.	3/4/10	have staff member A and B. Take Training on older Adult Protective Service Act and Fall & Accident Prevention  To Assure Continued Compliance with this Regulation, Administrator as Added this Training to the Mandatory New Staff Training Plan	Steps have been taken to correct violation; full compliance is not verifiable 4/20/10 <i>SAS/10</i> Date Initials (DPW)

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<b>SIGNATURE OF LEGAL ENTITY</b> <i>Austin Vinco</i>	<b>DATE</b> 3/8/10	<b>REGIONAL LICENSING/APPROVAL OF PLAN OF CORRECTION</b> <i>[Signature]</i>
		<b>DATE</b> 4/27/10

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91 Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control center, municipal emergency management agency and personal care home complaint hotline shall be posted on or by each telephone with an outside line.	The home has a telephone with an outside line in the hallway on the second floor. The telephone numbers for the nearest hospital, municipal emergency management agency, and personal care home complaint hotline were not posted on or near the telephone.	2/17/10	have posted the Telephone Numbers of the Nearest Hospital, Municipal Emergency Agency & Personal Care Home Complaint Hotline by the Hallway Phone.  To Assure Continued Compliance with this Regulation Staff and Administrator will check daily to make sure the Phone Numbers are still posted by the Phones	4/20/10 JJ

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<b>SIGNATURE OF LEGAL ENTITY</b> <i>Dustin Vingo</i>	<b>DATE</b> 3/8/10	<b>REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION</b> <i>[Signature]</i>
		<b>DATE</b> 4/27/10

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96a 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.	- The first aid kit in the home's basement did not have eye coverings.  - The first aid kit on the first floor of the home did not have disposable gloves.	2/17/10	Place Eye Covering and disposable Gloves in First Aid Kit in basement   To Assure Continued Compliance with this Regulation Staff will check weekly and when used to make sure Eye Covering & disposable Gloves are Return to First Aid Kit	4/20/10 <i>[Signature]</i>

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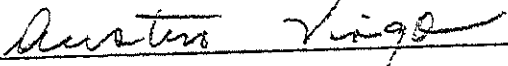

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100b The home shall ensure that ice, snow and obstructions are removed from outside walkways, ramps, steps, recreational areas and exterior fire escapes.	The home's designated smoking area had a half-inch accumulation of slush and ice in front of it.	2/16/10	<p>When Snow Stop Fails Remove Accumulation of Slush and Ice in Smoking Area.</p> <p>To Assure Continued Compliance with this Regulation: After each Snow Fall STAFF will Remove Accumulation of Slush &amp; Ice in Smoking Area</p>	4/20/10 <i>[Signature]</i>

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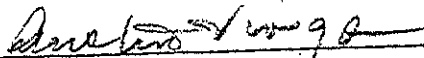

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103f Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers shall be required in refrigerators and freezers.	The freezer in the basement of the home did not have a thermometer.	2/17/10	Place Thermometer in basement Freezer  To Assure Continued Compliance with This Regulation.. Administrator will check weekly To make Sure Thermometer is still in Freezer	4/20/10 JBL

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183b Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.	Resident #1 had a Ventolin HFA Inhaler on his/her person. The resident's medical evaluation and PCH assessment, states the resident is unable self-administer medications.	2/23/10	Only the PCH Assessment was accidentally marked stating that the resident was unable to self-administer medication. The resident's doctor as provided verification that the resident is able to administer his Ventolin HFA Inhaler.  To assure continued compliance with this regulation, Administrator will secure verification from doctor for residents who self-administer medication in the future.	Steps have been taken to correct violation; full compliance is not verifiable 4/27/10 Date Initials (DPW)

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187a 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).	The medication administration record of resident #1 did not indicate a diagnosis or purpose for Ventolin HFA Inhaler.	3/1/10	The medication Administration Record for resident #1 now show the Purpose for the use of Ventolin HFA Inhaler.  To Assure Continued Compliance with this Regulation, Administration will Each month check the medication administration record when Received from Pharmacy to Assure diagnosis or Purpose are on the MAR.	4/20/10 