

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to EVADNEY SCOGGINS

LEGAL ENTITY

To operate SCOGGINS PERSONAL CARE BOARDING HOME

NAME OF FACILITY OR AGENCY

Located at 1245 WEST TIOGA 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 26
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 May 24, 2010 until May 24, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 140150

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

MAY 21 2010

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

Ms. Marcia Waite-Sokale, Administrator
Evadney Scoggins
Scoggins Personal Care Boarding Home
1245 West Tioga Street
Philadelphia, Pennsylvania 19140

Dear Ms. Waite-Sokale:

As a result of the Department of Public Welfare's licensing inspection on April 13, 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,

A handwritten signature in black ink that reads "Kevin T. Casey".

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 Scoggins Personal Care Boarding Home 1245 West Toga Street, Philadelphia, PA 19140		CURRENT LICENSE NUMBER 140150	
INSPECTION DATE(S) (include all dates of the inspection) April 13, 2010		REGIONAL REPRESENTATIVE Christine McHale and Patricia Adams	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) Marcia Waite-Sokale (Admin/Caregiver)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Marcia Waite-Sokale (Admin)</i>	DATE 5/13/2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Jason Harvey</i>	DATE 5-18-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	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 ensure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
3c The personal care home shall post the current license, a copy of the current Violation Report (VR) issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.	The home displays the violation report in a locked glass case in the dining room and is not accessible without asking a staff person to unlock the case.	4/13/2010	<p>3c. Immediately There is a sign now posted beneath the document case which states to access the content of this case please ask a direct care staff to open the case.</p> <p>Future The key is available to open the case 365/ 366 days Per year. Staff were informed by telephone and in person about this issue. Staff person(s) has access to the key 24/7.</p> <p>Responsible Person/Party The administrator or designee will be responsible to make sure the note is posted at all times. The administrator/designee will check on an ongoing basis to ensure that the note remain posted and if not seen replace the note promptly. The administrator or designee will inform new staff, residents, their designee and other about this system. (Res attached)</p>	5-18-10 JH

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

2010-05-18 10:37

48828

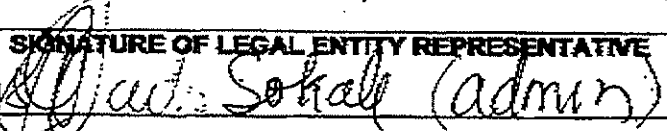

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2152273350 >

NAME AND ADDRESS OF PERSONAL CARE HOME Scoggins Personal Care Boarding Home 1245 West Tioga Street, Philadelphia, PA 19140	CURRENT LICENSE NUMBER 140150
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INSPECTION DATE(S) (include all dates of the inspection) April 13, 2010	REGIONAL REPRESENTATIVE Christine McHale and Patricia Adams
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PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)

SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 5/13/2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 5-18-10
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1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	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
27a If a home agrees to admit a resident eligible for SSI benefits, the home's charges for actual rent and other services may not exceed the SSI resident's actual current monthly income reduced by the current personal needs allowance.	The home currently serves 24 residents who receive SSI benefits. As per the home's rules, "Fire drill participation is mandatory. As per your contract failure to respond to a drill will cost you \$5.00."	4/13/2010	27a. <i>Immediately</i> The statement about fire drill charge of \$5.00 was stricken from all house rules/amendment. Future The statement was stricken from all resident folders on 4/13/2010 following the inspection. The files now shows amended 4/13/2010 signed the administrator. Responsible Person/Party The administrator is responsible to ensue that charges does not/will not reduced residents current personal needs allowance as stated in the regulations. (see attached)	5-18-10 101+

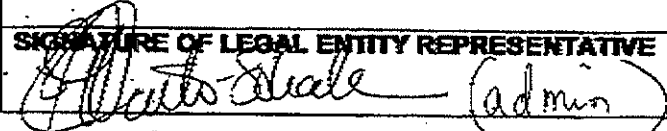
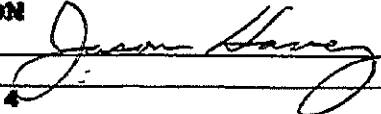
**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa. Code Chapter 2800**

NAME AND ADDRESS OF PERSONAL CARE HOME Scoggins Personal Care Boarding Home 1245 West Tioga Street, Philadelphia, PA 19140		CURRENT LICENSE NUMBER 140150	
INSPECTION DATE(S) (include all dates of the inspection) April 13, 2010		REGIONAL REPRESENTATIVE Christine Michale and Patricia Adams	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Patricia Adams (Admin)</i>		DATE 5/13/2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Joan Hawley</i>
			DATE 5-18-10

1 REGULATION 55 Pa. Code § 2800.	2 VIOLATION	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
54a Direct care staff persons shall have the following qualifications: (2) Have a high school diploma, GED diploma or active registry status on the Pennsylvania nurse aide registry.	Direct care staff person A does not have a high school diploma, GED, or active registry status on the PA nurse aide registry. Repeated Violation - 4/2/09	5/7/2010 Waiver info sent 6/30/2010 to get GED	54a. 2 Immediately Direct care staff person has a high school diploma/certificate. This however is from a non U.S institution. (see attached copies) Future Direct care staff was given a firm date of 6/30/2010 to produce a GED certification which is recognized in the state of Pennsylvania or face suspension /termination from the job unless a waiver is granted or GED is completed. The administrator has filled out paper work along with copies the high school certificate/diploma to see if a Waiver could be granted for staff A (see attached). Responsible Person/Party The administrator / designee is responsible to ensure a that the GED process is completed on time or follow through for the waiver. In the future no individual will be hired if all qualification are not met prior to the first day of work. <i>(see attached)</i>	Date 5-16-10 Initials (DPW) <i>DPW</i> Steps have been taken to correct violation; full compliance is not verifiable

2010-05-18 10:37
SCOGGINS PCH 2152273550 >>

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

NAME AND ADDRESS OF PERSONAL CARE HOME Scoggins Personal Care Boarding Home 1245 West Tioga Street, Philadelphia, PA 19140		CURRENT LICENSE NUMBER 140150	
INSPECTION DATE(S) (Include all dates of the inspection) April 13, 2010		REGIONAL REPRESENTATIVE Christine McHale and Patricia Adams	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 5/13/2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 5-18-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	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
65a Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following: (1) Evacuation procedures. (2) Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an	Ancillary staff person B completed orientation on 12/20/09. The home was not able to provide the staff persons' hire date or start date. It is unable to be determined if the staff person received orientation prior to or during the first work day.	4/13/2010 4/16/2010 <u>ongoing</u>	65a <i>immediately</i> Ancillary staff person B. did re-sign all his paper work with an effective date of 3/10/2009 per staff recollection when he filed the forms he was told he could not start until after the criminal background check was received. Per attached criminal background was done 3/9/2009. Attached are copies of the canceled checks. <i>Future</i> Scoggins PCH now has a check list which MUST be completed prior to the first day of work for any staff (see attached check list). Responsible Person/Party The administrator or designee is responsible for making sure are prospective staff complete all required training from 65a through 65d prior to beginning their job in this home. The administrator/designee is also responsible for making sure all necessary forms and paper work are completed properly and bears the correct date (example start date, completion dates and follow up dates if needed). <i>see attached</i>)	Date 5-18-10 DPW Infills (DPW) Steps have been taken to correct violation; full compliance is not verifiable

2010-05-18 10:57
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P 5/18

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

Page 6 of 16

NAME AND ADDRESS OF PERSONAL CARE HOME Scoggins Personal Care Boarding Home 1246 West Toga Street, Philadelphia, PA 19140		CURRENT LICENSE NUMBER 140150
INSPECTION DATE(S) (include all dates of the inspection) April 13, 2010	REGIONAL REPRESENTATIVE Christine McHale and Patricia Adams	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)		

SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>[Signature]</i>	DATE 3/13/2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 5-18-10
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1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	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
emergency location if applicable. (3) The designated meeting place outside the building or within the fire-safe area in the event of an actual fire. (4) Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable. (5) The location and use of fire extinguishers. (6) Smoke detectors and fire alarms. (7) Telephone use and notification of emergency services.		4/13/2010 & 4/16/2010	(see previous page)	Steps have been taken to correct violation; full compliance is not verifiable Date 5-16-10 Initials (DPW) <i>[Signature]</i>

2010-05-18 10:57
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**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2800**

2010-03-18 10:57
8/10/2010
SCOGGINS PCH 2192273850 >>

NAME AND ADDRESS OF PERSONAL CARE HOME Scoggins Personal Care Boarding Home 1245 West Tioga Street, Philadelphia, PA 19146	CURRENT LICENSE NUMBER 140150
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INSPECTION DATE(S) (include all dates of the inspection) April 13, 2010	REGIONAL REPRESENTATIVE Christine McHale and Patricia Adams
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65c Ancillary staff persons shall have a general orientation to their specific job functions as it relates to their position prior to working in that capacity.	Ancillary staff person B did not have a general orientation to their specific job functions.	4/13/2010 & 4/16/2010	<u>Immediately</u> Staff person was made aware of the violation. Ancillary staff person B was given another orientation to his job functions. He did sign and did state that he had done it the year before. <u>Future</u> All staff person <u>MUST</u> now complete the requirements of our check list which detail everything from 2600 - 65A - 65D.	Date <u>5-18-10</u> Initials (DPW) <u>DPW</u> Crisis have been taken to correct violation; full compliance is not verifiable

(see attached) prior to starting work here.
Responsible Party/Person
 Administrator/Designee is responsible to monitor the checklist and get all education requirement done before starting work.

**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa. Code Chapter 2800**

2010-03-18 10:57 AM/05/18 SCOGGINS PCH 2192273550 >>

NAME AND ADDRESS OF PERSONAL CARE HOME Scoggins Personal Care Boarding Home 1245 West Tioga Street, Philadelphia, PA 19140	CURRENT LICENSE NUMBER 140150
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INSPECTION DATE(S) (Include all dates of the inspection) April 13, 2010	REGIONAL REPRESENTATIVE Christine McHale and Patricia Adams
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856 Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.	The large black trash can in the home's kitchen was not covered during the entire inspection day.	4/13/2010	<p><i>85d. Immediately</i> A sign is now displayed on the wall above the trash can which states "Trash can must be closed at all times". See Attached (85d)</p> <p><i>Future</i> All staff has been notified via telephone and in person about this issue. All staff have been instructed to cover can after every use and to cover the can if they pass it and it's open.</p> <p><i>Responsible Person/Party</i> The administrator and all staff will monitor the trash can on a daily basis to make sure it is always closed. The administrator /designee is responsible to ensure that the sign remain posted (see attached).</p>	5-18-10 <i>JK</i>

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

2010-05-18 10:58
SCOGGINS PCH 2192279590 >

NAME AND ADDRESS OF PERSONAL CARE HOME Scoggins Personal Care Boarding Home 1245 West Tioga Street, Philadelphia, PA 19140		CURRENT LICENSE NUMBER 140150	
INSPECTION DATE(S) (Include all dates of the inspection) April 13, 2010		REGIONAL REPRESENTATIVE Christine McHale and Patricia Adams	
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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Christine McHale (admin)</i>	DATE 5/13/2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Jason Harvey</i>	DATE 5-18-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	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
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 only had 9-1-1 posted on the telephones in the kitchen.	4/13/2010	91. <i>Immediately</i> Once the licensing representative pointed out the missing numbers. A copy of the emergency number was removed from the Policy and Procedure manual and posted by all phones. Future/Responsible Person/Party The administrator and all staff are responsible to ensure that the signs remain posted at all times. Ultimately the administrator will check on a weekly schedule and if missing replace promptly.	5-18-10 <i>JH</i>


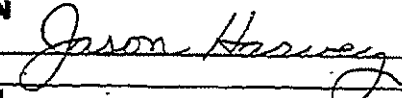
**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600**

NAME AND ADDRESS OF PERSONAL CARE HOME Scoggins Personal Care Boarding Home 1245 West Toga Street, Philadelphia, PA 19140		CURRENT LICENSE NUMBER 140150	
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			DATE 5-18-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	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
95 Furniture and equipment shall be in good repair, clean and free of hazards.	There are two closets in resident room #5. The closet on the left did not have a handle. The closet on the right was not able to be opened.	4/13/2010 6 4/15/2010	<p>95a Immediately While the licensing Reps. were still conducting the inspection ancillary staff was made aware of the problem and did start the job of fixing the closets.</p> <p>Future Closet on the left did have a handle attached before the end of the day 04/13/2010. Closet on the right was taken off the track and realigned by ancillary staff 04/15/2010.</p> <p>Responsible Person/Party Administrator/designee is responsible for going throughout the buildings on a weekly basis to monitor that all the rooms, furniture, required equipment are in proper working order. If anything is broken or loose it will be fixed immediately by admin or ancillary staff person. (see attached)</p>	5-18-10 JH

VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2800

2010-05-18 10:58
 01/11/2010
 SCOGGINS PCH 2102273530 >>

NAME AND ADDRESS OF PERSONAL CARE HOME Scoggins Personal Care Boarding Home 1245 West Tioga Street, Philadelphia, PA 19146		CURRENT LICENSE NUMBER 140160
INSPECTION DATE(S) (include all dates of the inspection) April 13, 2010	REGIONAL REPRESENTATIVE Christine McHale and Patricia Adams	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)		
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 5/13/2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 
		DATE 5-18-10

1 REGULATION 55 Pa.Code § 2800.	2 VIOLATION	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
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 home's Johnson & Johnson first aid kit in the kitchen closet did not have a thermometer.	4/13/2010	<p>96a. Immediately As soon as the deficiency was notice in front of Rep. C.M. the administrator did remove 2 extra thermometers from the first aid kit in the office leaving 2 there and did place them in the kit which was lacking.</p> <p>Future All first kits will be checked on a monthly basis by administrator/designee and all direct care staff. If any item is missing or out dated the administrator or designee will replace the items promptly.</p> <p>Responsible Person/Party To ensure that this violation does not recur administrator/designee will keep a monthly check list and will be responsible for making necessary corrections. <i>[Signature]</i></p>	5-18-10 JH

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

Page 11 of 16

NAME AND ADDRESS OF PERSONAL CARE HOME Scoggins Personal Care Boarding Home 1245 West Tioga Street, Philadelphia, PA 19140		CURRENT LICENSE NUMBER 140160
INSPECTION DATE(S) (Include all dates of the inspection) April 13, 2010	REGIONAL REPRESENTATIVE Christine McHale and Patricia Adams	
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		DATE 5-18-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	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
121a Stairways, hallways, doorways, passageways and egress routes from rooms and from the building shall be unlocked and unobstructed.	A chair was placed behind the door to resident room #5 preventing the door from fully opening.	4/13/2010 initial move 4/15/2010 chairs were changed.	121a. <i>Immediately</i> Once the problem with the chair was brought to the administrators attention, the administrator did immediately remove the chair by placing it where it belonged. <i>Future</i> Administrator is currently considering two ways of dealing with this issue. 1. Smaller chairs are now in the room (the wider chairs were placed in a larger room). 2. All staff have been educated on the issue of safety including not blocking egress. Residents have been on safety issues especially the need to have doors clear of obstructions at all times. <i>Responsible Person/Party</i> The administrator and all staff are responsible for making sure that safety issues are monitored and addressed on a daily basis adjustments will be made immediately by everyone.	5-18-10 <i>OK</i>

2010-05-18 10:58 AM
SCOGGINS PCH 2152273850 >

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

NAME AND ADDRESS OF PERSONAL CARE HOME Scoggins Personal Care Boarding Home 1246 West Tioga Street, Philadelphia, PA 19140	CURRENT LICENSE NUMBER 140160
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INSPECTION DATE(S) (include all dates of the inspection) April 13, 2010	REGIONAL REPRESENTATIVE Christine McFalls and Patricia Adams
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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>[Signature]</i> (admin)	DATE 5/13/2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 5-18-10
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1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	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
162e A change to a menu shall be posted in a conspicuous and public place in the home and shall be accessible to a resident in advance of the meal. Meal substitutions shall be made in accordance with 161.	The home's menu dated 4/11/10 states, "All menu subject to change without notice."	4/13/2010	<p>162e Immediately Once the representative from DPW stated that the wording "all menu subject to change without notice" was a violation the administrator did draw a line through the information.</p> <p>Future All meal substitutions will be made in accordance with the regulations. We already have in place a list posted of possible substitution for each meal. per our menu all meals have a least 2 choices in accordance to the regulations and also the Food Pyramid requirement.</p> <p>Responsible Person/Party The administrator and designee are responsible to ensure all menus are following the requirements. All substitutions will be kept and dated as per regulations in 2600. (see attached)</p>	5-18-10 JH

2010-09-18 10:58 SCOGGINS PCH 2492273590 >

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

2010-05-18 10:38
SCOGINS PCH 219227350 >>

NAME AND ADDRESS OF PERSONAL CARE HOME Scoggins Personal Care Boarding Home 1245 West Tioga Street, Philadelphia, PA 19140	CURRENT LICENSE NUMBER 140160
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INSPECTION DATE(S) (include all dates of the inspection) April 13, 2010	REGIONAL REPRESENTATIVE Christine McHale and Patricia Adams
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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Antonio Soliale (admin)</i>	DATE 5/13/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Jason Harvey</i>	DATE 5-18-10
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1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	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 ensure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
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.	A bottle of nitroglycerin tablets was found unlocked on the nightstand next to the bed closest to the door in resident room #7. Resident #7 does not self administer medications. Repeated Violation - 4/2/09	4/13/2010	183b. Immediately The bottle of nitroglycerin tablets were immediately removed from the room by the administrator in the presence of the DPW inspectors. Future The resident in room #7 who had left the nitroglycerin tablets out per attached Support Plan, Assessment, & Medical Information does not have a psych problems. All records on this resident states [redacted] can self administer and does self administer. The nitroglycerin were left in [redacted] haste to get to Temple Hospital for [redacted] Chemotherapy appointment. Resident was frantic when [redacted] returned because he thought [redacted] had misplaced or lost the bottle. Administrator did inform [redacted] of the problem and did give [redacted] the medication since [redacted] need to keep it on [redacted] always due to heart problems. Resident also has a combination lock box where [redacted] stores the medicine [redacted] was reminded to be more cautious. Responsible Person/Party Administrator and all medication trained staff are responsible to make that all medications are locked away for safety. All staff will monitor on a	Steps have been taken to correct violation; full compliance is not verifiable 5-18-10 Date Initials (DPW)

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

2010-05-18 10:59
SCOGGINS PCH 2152273950 >>

NAME AND ADDRESS OF PERSONAL CARE HOME Scoggins Personal Care Boarding Home 1245 West Tioga Street, Philadelphia, PA 19140		CURRENT LICENSE NUMBER 140150
INSPECTION DATE(S) (Include all dates of this inspection) April 13, 2010	REGIONAL REPRESENTATIVE Christine McHale and Patricia Adams	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)		
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Christine McHale (admin)</i>	DATE 5/13/2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Juan Herweg</i>
		DATE 5-18-10

1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	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
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).	Resident #1's medication administration record did not include a diagnosis for Abilify 15 mg and Multivitamin.	4/13/2010	<p>187a Immediately The administrator did write the reason why Abilify and Multivitamin were prescribed for resident # 1. The information was added once the problem was noticed.</p> <p>Future The administrator and all medication trained staff will ensure that all medications listed on the MAR indicate diagnosis or purpose. Checks will be made whenever a new resident enters the home or when or when new medications are prescribed.</p> <p>Responsible Person/Party All medication trained staff along with the administrator is responsible for ensuring continued compliance with the regulations.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>5-18-10 Date Initials (DPW)</p>

**VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2800**

2010-05-18 10:59 AM
SCOGGINS PCH 2152273550 >>

NAME AND ADDRESS OF PERSONAL CARE HOME Scoggins Personal Care Boarding Home 1245 West Toga Street, Philadelphia, PA 19140		CURRENT LICENSE NUMBER 140150
INSPECTION DATE(S) (Include all dates of the inspection) April 13, 2010	REGIONAL REPRESENTATIVE Christine McHale and Patricia Adams	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)		
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Patricia Adams (admin)</i>	DATE 5/18/2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Juan Harvey</i>
		DATE 5-18-10

1 REGULATION 55 Pa.Code § 2800.	2 VIOLATION	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
252 Each resident's record shall include the following information: (1) Name, gender, admission date, birth date and Social Security number. (2) Race, height, weight, color of hair, color of eyes, religious affiliation, if any, and identifying marks. (3) A photograph of the resident that is no more than 2 years old.	- Resident #1's record did not include hair color and identifying marks. - Resident #2's record did not include identifying marks and the resident's photograph was not dated. - Resident #3's record did not include identifying marks and the resident's photograph was not dated. - Resident #4's record did not include identifying marks. - Resident #5's record did not	4/13/2010	252. Immediately After the inspection was completed all resident records were adjusted to include identifying marks, all photographs were dated. Future Scoggins PCH has a check list of all required items which are needed for each individuals folder added to the list is dated photographs, identifying marks, along with hair, eye color, weight etc. (see attached proof). Responsible Person/Party Administrator and designee is responsible for following the attached check list in order to maintain compliance for all requirements according to the regulations. Administrator and designee will be monitor each time a new resident enters the home.	5-18-10 JH

(see attached)

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


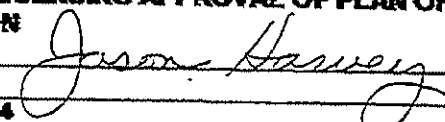
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2010-05-18 10:59
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 SC06GINS.PCH 2192273650>>

NAME AND ADDRESS OF PERSONAL CARE HOME Scoggins Personal Care Boarding Home 1246 West Tioga Street, Philadelphia, PA 19140	CURRENT LICENSE NUMBER 140150
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INSPECTION DATE(S) (Include all dates of the inspection) April 13, 2010.	REGIONAL REPRESENTATIVE Christine McHale and Patricia Adams
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PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)

SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 5/13/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 5-18-10
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1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	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 ensure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
252 – continued	include identifying marks and the resident's photograph was not dated.	5/13/2010	see previous page	5-18-10 JH