



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
Norristown State Hospital
1001 Stergese Street
Bldg 2 Rm. 161
Norristown, Pennsylvania 19401

ADULT RESIDENTIAL LICENSING

1-866-711-4115
610-270-1137

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
Mailing Date: August 5, 2010

Mr. Howard Lavin, Administrator
Tabor Manor
6730 Tabor Avenue
Philadelphia, Pennsylvania 19111

Dear Mr. Lavin:

As a result of the Department of Public Welfare's licensing inspection on April 16, 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.

Sincerely,

Laura Helmuth (Ref)

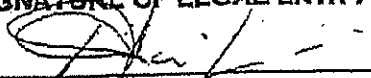
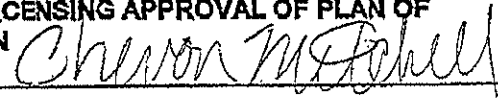
Laura Helmuth
Regional Licensing Administrator


Enclosure(s)
Violation Report

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

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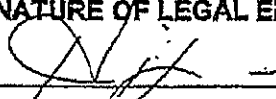
NAME AND ADDRESS OF PERSONAL CARE HOME Tabor Manor 6730 Tabor Avenue Philadelphia, PA 19111		CURRENT LICENSE NUMBER 116980	
INSPECTION DATE(S). (Include all dates of the inspection) April 16, 2010		REGIONAL REPRESENTATIVE Kimberli A. Foulkes and Leslie Erhardt	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 6.14.10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 7/6/10

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
42a A resident shall be treated with dignity and respect.	At 8:40am, while sitting in the dining area, representatives of the Department observed Ancillary Staff Person A speak harshly and loudly to Resident #1. Ancillary Staff Person A yelled at the resident, "You don't tell me when to bring your breakfast! I'm back here by myself. You go sit over there and wait for me to bring you your breakfast!" Then as he was distributing the food he later yelled to everyone in the dining area, "You guys are going to have to be patient, there are only	6.11.10	42c: Our cook (A) is a very compassionate person and cares about our residents. He does have a loud voice and we do talk to him about controlling the level of his voice. The administrator has also conducted a meeting with the staff on how to speak to residents. The Administrator trained the cook on the importance of and how to speak respectfully to the residents.	Steps have been taken to correct violation; full compliance is not verifiable 7/6/10 Date Initials (DPW) 

Tabor Manor Po

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

NAME AND ADDRESS OF PERSONAL CARE HOME Tabor Manor 8730 Tabor Avenue Philadelphia, PA 19114		CURRENT LICENSE NUMBER 116980	
INSPECTION DATE(S) (Include all dates of the inspection) April 16, 2010		REGIONAL REPRESENTATIVE Kimberl A. Foulkes and Leslie Erhardt	
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 6-14-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION Chevon Mitchell	DATE 7/6/10

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57b, 57c 57b Direct care staff persons shall be available to provide at least one hour per day of personal care services to each mobile resident. 57c Direct care staff persons shall be available to provide at least two hours per day of personal care services to each resident who has mobility needs.	Based on the home's census of residents with mobility needs and residents without mobility needs on 4/16/10, the home is required to provide 50 hours per day of personal care service hours. From 4/15/10 at 7:00am through 4/16/10 at 7:00am, the total number of available personal care staffing hours was 49.	6-11-10	57b, 57c: The administrator will ensure that the proper staff hours are present in the home to accommodate our resident's needs. The administrator will also ensure that the minimum staff hours are available to the residents. If a staff member does not show or calls out the administrator will ensure that those staff hours will be accommodated by other staff members.	

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

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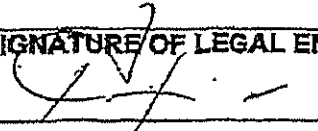

NAME AND ADDRESS OF PERSONAL CARE HOME Tabor Manor 673D Tabor Avenue Philadelphia, PA 19111		CURRENT LICENSE NUMBER 116980	
INSPECTION DATE(S) (Include all dates of the inspection) April 16, 2010		REGIONAL REPRESENTATIVE Kimberli A. Foulkes and Leslie Erhardt	
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Tabor Manor Po

Jun 14 10:12:31p

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
51 When regularly scheduled direct care staff persons are absent, the administrator shall arrange for coverage by substitute personnel who meet the direct care staff qualifications and training requirements as specified in 54 and 65.	Direct Care Staff Person B was scheduled to work on 4/15/10 from 11:00pm to 7:30am on 4/16/10 with Direct Care Staff Person C. Direct Care Staff Person B initialed on the schedule that he worked the shift. On 4/16/10 at 6:30am, Direct Care Staff Person B was not present in the home. Direct Care Staff Person C stated that Direct Care Staff Person B did not come in and that she was the only direct care staff person present from 11:00pm on 4/15/10 to 6:00am on 4/16/10. The administrator did not arrange for substitute coverage when Direct Care Staff Person B did not come in for his regularly scheduled shift.	6.11.10	61: Staff Person (B) had worked the 7:00pm – 3:30pm shift that day. Our policy is that if a staff member is late or does not show for work the appropriate amount of staff from the previous shift stays until relief staff arrive. The administrator will ensure that the proper amount of staff is present in the home at all times.	Steps have been taken to correct violation; full compliance is not verifiable 7/6/10 Date Initials (DPW)

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

NAME AND ADDRESS OF PERSONAL CARE HOME Tabor Manor 8730 Tabor Avenue Philadelphia, PA 19111		CURRENT LICENSE NUMBER 116980		
INSPECTION DATE(S) (Include all dates of the inspection) April 18, 2010		REGIONAL REPRESENTATIVE Kimberli A. Foukes and Leslie Erhardt		
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 6-14-10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 7/6/10

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163b Staff persons, volunteers and residents shall follow sanitary practices while working in the kitchen areas.	At 6:40am, representatives of the Department observed Ancillary Staff Person A pushing a cart that contained waffles, toast and sausage. Ancillary Staff Person A was serving the food without gloves by grabbing pieces with his hands, putting them on the plates and then passing the plates to the residents. When Ancillary Staff Person A realized representatives of the Department were present in the room, he put on gloves to continue serving.	6-11-10	163b: As policy all staff wears gloves while serving meals. Our cook (A) has been instructed to follow this rule. Our cook (A) now wears gloves during food preparation and serving. The administrator and other staff will ensure that our cook (A) is always wearing gloves while handling food. Staff is instructed to report to the administrator all observations when the cook is <u>not</u> wearing gloves.	Steps have been taken to correct violation; full compliance is not verifiable  Date: 7/6/10 Initials (DPW)

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