

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to HUGH ROBINSON

LEGAL ENTITY

To operate ROBINSON PERSONAL CARE HOME

NAME OF FACILITY OR AGENCY

Located at 4104 WEST GIRARD AVENUE, PHILADELPHIA, PA 19104

(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 20
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 June 3, 2010 until June 3, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 198810

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 25 2010

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

Mr. Hugh Robinson, Administrator
Robinson Personal Care Home
4104 West Girard Avenue
Philadelphia, Pennsylvania 19104

Dear Mr. Robinson:

As a result of the Department of Public Welfare's licensing inspection on April 27, 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.

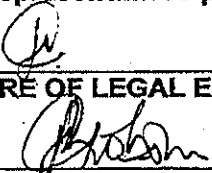
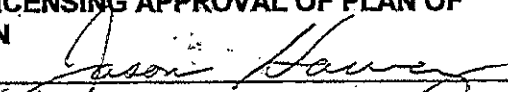
Sincerely,

A handwritten signature in cursive script that reads "Kevin T. Casey".

Kevin T. Casey
Deputy Secretary

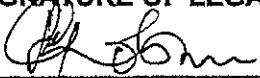

Enclosures
License
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME Robinson Personal Care Home 4104 West Girard Avenue, Philadelphia, PA 19104		CURRENT LICENSE NUMBER 198810	
INSPECTION DATE(S) (Include all dates of the inspection) April 27, 2010.		REGIONAL REPRESENTATIVE Judith Folan, Mary Ellen Shoup	
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 05/13/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 
			DATE 5-17-10

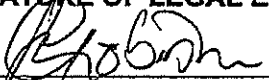

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25c12 The contract shall specify the charges to the resident, if any, for holding a bed during hospitalization or other extended absence from the home.	Resident #2's contract did not specify the charges for holding a bed during hospitalization or other extended absences.	4/27/2010	Resident #2 contract was amended specifying charges for holding a bed during hospitalization. In the future the administrator/designee will ensure that all contracts states charges for holding bed during hospitalization.	5-17-10 JH

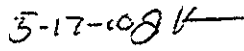
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53a The administrator shall have one of the following qualifications: (1) A license as a registered nurse from the Pennsylvania Department of State. (2) An associate's degree (3) 60 or more credit hours from an accredited college or university. (4) A license as a licensed practical nurse from the Pennsylvania Department of State and 1 year of work experience in a related field. (5) A license as a nursing	Credentials of the Administrator, to support the qualifications of this position, at a minimum a high school diploma or equivalent, were not maintained in the facility and were therefore not available for review.	04/27/2010	Credential for Administrator, was placed on administrator's record. The administrator will ensure that in the Future all necessary documents are in the administrator's file	5-17-10 JH

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home administrator from the Pennsylvania Department of State. (6) For a home serving 8 or fewer residents, a general education development (GED) diploma or high school diploma and 2 years direct care or administrative experience in the human services field.		04/27/2010		5-17-10 



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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.	The personnel record of direct care staff person A lacked documentation of a high school diploma or equivalent.	04/28/10	DIRECT CARE STAFF PERSON A HIGH SCHOOL DIPLOMA WAS NOT ON FILE AT THE TIME OF INSPECTION BUT WAS PLACED ON FILE ON APRIL 28, 2010. SEE ATTACHED COPY. IN THE FUTURE THE ADMINISTRATOR WILL ENSURE THAT ALL EMPLOYEE'S DOCUMENTS ARE ON FILE. <i>The Administrator is requesting for a waiver of Direct Care Staff Person A's Jamaican High School diploma. Staff Person A will only work in a House Keeping Capacity until the waiver is approved by DPW or receives a Ged or</i>	Steps have been taken to correct violation; full compliance is not verifiable Date 5-17-10 Initials (DPW) <i>JH</i>

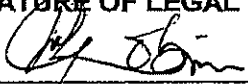
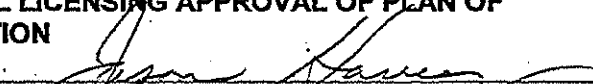
AN ACTIVE REGISTRY STATUS ON THE PA NURSE AIDE REGISTRY. JH 5-17-10

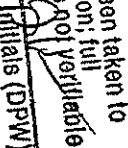
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65a Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following: (1) Evacuation procedures. (2) Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an	Orientation documents in the personnel record of direct care staff person A, who was hired on or about 2/4/2010, had not been completed, signed, or dated to support that these requirements were met.	04/27/10	Orientation documents for direct care staff person A is completed and duly signed. In the future the Administrator or assistant will ensure all orientation documents are completed and signed, PRIOR TO OR DURING THE FIRST WORKDAY. JH 5-17-10	Steps have been taken to correct violation; full compliance is not verifiable 5-17-10 Date Initials (DPW) 

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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.		04/27/10		Steps have been taken to correct violation; full compliance is not verified. Date: 5-17-10 Initials (DPW): 

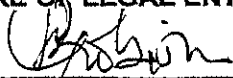
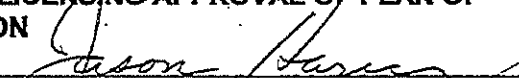
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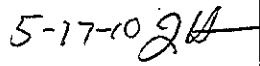
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65b Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following: (1) Resident rights. (2) Emergency medical plan. (3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act. (4) Reporting of reportable incidents and conditions	Orientation documents in the personnel record of direct care staff person A, who was hired on or about 2/4/2010, had not been completed, signed, or dated to support that these requirements were met.	04/27/2010	Orientation documents for direct care staff person A is completed and duly signed. In the future the Administrator or assistant will ensure all orientation documents are completed and signed, within 40 scheduled working hours. JF 5-17-10	Steps have been taken to correct violation; full compliance is not verifiable Date 5-17-10 Initials (DPW) 

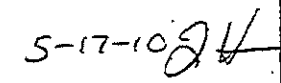
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93a Each ramp, interior stairway and outside steps shall have a well-secured handrail.	The handrail for the stairway leading to the ground floor was loose and not adequately secured at the top of the stairs.	04/27/2010	Repair was done on handrail leading to ground floor on April 27, 2010. In the future the administrator will that all handrails are secure and in good order.	5-17-10 

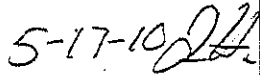
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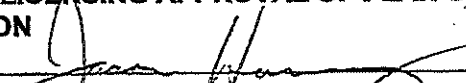
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96a The home shall have a first aid kit that includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers	The first aid kit lacked a thermometer and one was not available elsewhere in the home.	04/28/2010	Thermometer was placed in firstaid kit on April 28, 2010. In the Administrator will ensure that all first aid kit are fully equipped.	5-17-10 


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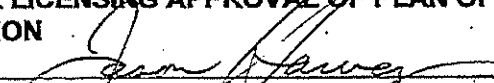
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103b Kitchen surfaces shall be of a nonporous material and cleaned and sanitized after each meal.	A wooden cutting board, which had been heavily used, and is unable to be properly cleaned and sanitized, was observed in the kitchen.	4/27/2010	The wooden cutting board was disposed of on 4/27/2010. The administrator will ensure that there is no wooden cutting board and all cutting surfaces will be of nonporous materials.	5-17-10 

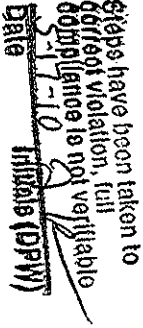
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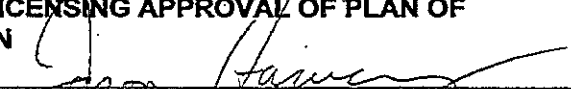
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123a Exit doors shall be equipped so that they can be easily opened by residents from the inside without the use of a key or other manual device that can be removed, misplaced or lost.	The fire exit door in the basement had a key locking device that was not permanently disabled. Repeat Violation – 4/7/09	4/28/2010	The key locking device was permanently disabled on April 28, 2010. The exit door in the basement will not be equipped with any key locking device so that it will always be accessible. Posted diagrams throughout the home now shows exit routes, pull stations and placement of fire extinguishers.	5-17-10 

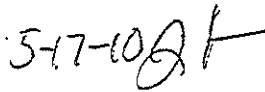
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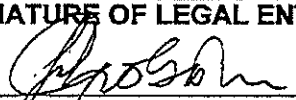

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123c For a home serving 9 or more residents, an emergency evacuation diagram of each floor showing corridors, line of travel to exit doors and location of the fire extinguishers and pull signals shall be posted in a conspicuous and public place on each floor.	Emergency evacuation diagrams throughout the home did not clearly outline the layout of the floors with lines of travel, placement of pull stations, extinguishers and exits. Repeat Violation – 4/7/09	05/16/2010	Posted diagrams throughout the home now shows exit route, pull stations and placement of extinguishers. In the future the administrator will ensure all diagrams shows where the exits routes are also pull station and placement of extinguishers.	Date 5-17-10 Initials (DPW) 

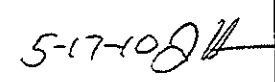
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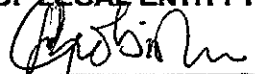
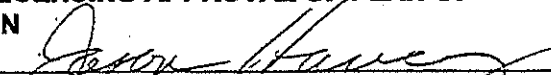
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123d If the home serves one or more residents with mobility needs above or below grade level of the home there shall be a fire-safe area, as specified in writing within the past year by a fire safety expert, on the same floor as each resident with mobility needs.	Resident #3's room was located on the third floor. His medical evaluation signed by the physician stated that the resident would have difficulty understanding and following oral direction in the event of an emergency. There was no fire safe area designated by a fire safety expert.	04/27/2010	Resident #3 was relocated on the 1 st floor due to his immobility there it will be easier for him to evacuate the building in case of an emergency.	5-17-10 


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

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INSPECTION DATE(S) (Include all dates of the inspection) April 27, 2010		REGIONAL REPRESENTATIVE Judith Folan, Mary Ellen Shoup	
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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 05/13/2010	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 5-17-10



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124 The home shall notify the local fire department in writing of the address of the home, location of the bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept	There was no notification to the fire department of the location of the bedroom and of the assistance needed in an emergency by Resident #3 who is immobile.	04/28/2010	Notification was sent to the Fire Department informing them of the immobility of resident #3 and his location in the building. In the future the administrator will notify the fire department of all immobile resident.	5-17-10 

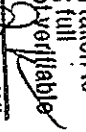
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126a A professional furnace cleaning company or trained maintenance staff person shall inspect furnaces at least annually. Documentation of the inspection shall be kept.	There was no documentation available relating to the newly installed heating system or information that it had been inspected by a professional heating person or agency.	05/13/2010	The newly installed heating system was inspected and documentation obtained. The administrator will ensure that in the future all systems are inspected and documented.	5-17-10 

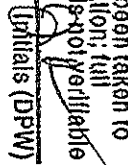
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141a The medical evaluation shall include the following: (1) A general physical examination by a physician, physician's assistant or nurse practitioner. (2) Medical diagnosis including physical or mental disabilities of the resident, if any. (3) Medical information pertinent to diagnosis and treatment in case of an emergency. (4) Special health or dietary needs of the resident.	The medical evaluation for Resident # 1, dated 1/16/2010, lacked information related to the need for continuous oxygen, diabetes, (for which medications were being given), dietary needs and dosages or times for the listed medications. The medical evaluation for Resident # 2, dated 1/16/2010, lacked a medical history, allergies, medications and whether the resident can self administer medications.	04/29/2010	Medical evaluation for resident #1 now shows the need for continuous oxygen, dietary needs, diabetes, also dosage and frequency of medications administered. Medical evaluation for resident #2 now show medical history, allergies, and whether the resident can self administer medication. In the future the Administrator will ensure that all medical evaluation are proper filled out and signed.	Steps have been taken to correct violation; full compliance is not verifiable Date 5-17-10 Initials (DPW) 

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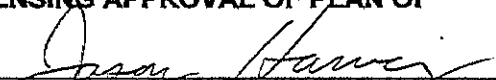
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(5) Allergies. (6) Immunization history. (7) Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications. (8) Body positioning and movement stimulation for residents, if appropriate. (9) Health status. (10) Mobility assessment, updated annually or at the Department's request.		04/29/2010		Steps have been taken to correct violation; full compliance is not verifiable S.F.T.D. Date  (Initials (DPW))

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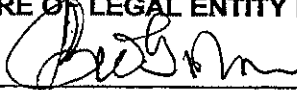
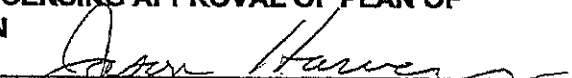
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161b At least three nutritionally well-balanced meals shall be offered daily to the resident. Each meal shall include an alternative food and drink item from which the resident may choose	Menus did not include alternate food and beverage items for each meal.	04/28/2010	Menus now include alternate food and beverages for each meal. See copy attached.	5-17-10 JK

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221a The administrator shall develop a program of activities designed to promote each resident's active involvement with other residents, the resident's family and the community.	The activity program plan, as reflected on the posted monthly calendar, does not reflect a variety of programs to meet resident needs. For 4 days of each week the calendar states only "daily activity program." The only noted events are bingo each Thursday and church and movies on weekends. Residents were observed sitting idly in common areas during the inspection.	04/28/2010	Activities calendar now shows the different activities for each day. See copy attached.	5-17-10 JK

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226a The resident shall be assessed for mobility needs as part of the resident's assessment.	Resident #3's assessment did not include the resident's mobility needs.	04/27/2010	Resident #3's assessment now include the resident's mobility need. See copy attached. In the future the administrator/designee will ensure that all resident assessment shows there mobility needs.	Steps have been taken to correct violation; full compliance is not verifiable. Date 5-17-10 Initials (DPW) 