

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to GLEN AND JANET VIRGO

LEGAL ENTITY

To operate WALNUT MANOR

NAME OF FACILITY OR AGENCY

Located at 5032 WALNUT STREET, PHILADELPHIA, PA 19139

(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 27
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 July 3, 2010 until January 3, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 117191

Robert E. Robinson

ISSUING OFFICER

Kenneth V. 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

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

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

MAILING DATE:

JUL 06 2010

Ms. Janet Virgo, Administrator
 Glen and Janet Virgo
 Walnut Manor
 5032 Walnut Street
 Philadelphia, Pennsylvania 19139

Dear Ms. Virgo:

As a result of the Department of Public Welfare's (Department) licensing inspection on May 7, 2010 and June 14, 2010 of the above personal care home, the violations specified on the enclosed Violation Report were found.

A PROVISIONAL license is being issued based on the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes). Your PROVISIONAL license is enclosed.

In accordance with 55 Pa.Code § 2600.269(b) (relating to ban on admissions) no new resident admissions are permitted after the date of this letter.

All violations specified on the 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.

Pursuant to 62 P.S. 1085-1087 and 55 Pa.Code §§ 2600.261-268 (relating to enforcement), the Department intends to assess a fine for the following violations unless fully corrected on or before the mandated correction date.

55 Pa.Code Chapter 2600 Section no.	Class of Violation	Census at Inspection X	Fine Per resident Per day	Calculated Fine = Per day	Mandated Correction Date (to avoid Fine)
51/52	II	26	\$5	\$150	5 calendar days from mailing date of this letter
252	III	26	\$3	\$78	15 calendar days from mailing date of this letter

A fine will be assessed on a daily basis beginning with the date of this letter and will continue until the violation is fully corrected, and full compliance with the regulation has been achieved. If the violation is fully corrected, and full compliance with the regulation has been achieved, by the mandated correction date, no fine will be assessed. You must notify the Department's Regional Adult Residential Licensing office in writing as soon as each violation is fully corrected and submit written documentation of each correction. The Department will conduct an on-site inspection after the mandated correction date, and within 20 calendar days of the date of this letter. If one or more violations is not fully corrected and full compliance with the regulation has not been achieved, you will periodically receive invoices from the Department's Bureau of Financial Operations with payment instructions. The fines will continue to accumulate until the violation is fully corrected and full compliance with the regulation has been achieved.

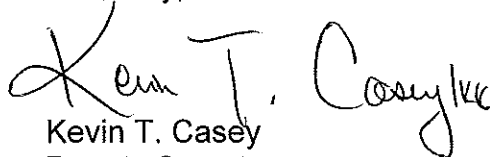
Once you receive your invoice from the Bureau of Financial Operations, if you disagree with the amount of the penalty, you have the right to appeal through a hearing before the Bureau of Hearings and Appeals, Department of Public Welfare. If you decide to appeal, a written request to appeal the fine must be received, along with the assessed daily fine, not to exceed \$500, in accordance with 55 Pa.Code § 2600.263 (relating to appeal of penalty). All appeal requests must be sent to the address indicated on the invoice you will receive from the Bureau of Financial Operations.

If you disagree with the decision to issue a PROVISIONAL license or ban on admissions, you have the right to appeal through hearing before the Bureau of Hearings and Appeals, Department of Public Welfare in accordance with 1 Pa.Code Part II, Chs. 31-35. If you decide to appeal, a written request for an appeal must be received within 10 days of the date of this letter by:

Karen E. Kroh, Director
Adult Residential Licensing
Department of Public Welfare
423 Health and Welfare Building
Seventh and Forster Streets
Harrisburg, Pennsylvania 17120

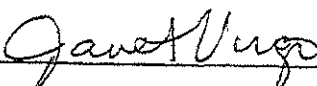

This decision is final 11 days from the date of this letter, or if you decide to appeal, upon issuance of a decision by the Bureau of Hearings and Appeals.

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 Walnut Manor 5032 Walnut Street, Philadelphia, PA 19139		CURRENT LICENSE NUMBER 117190
INSPECTION DATE(S) (Include all dates of the inspection) May 7, 2010	REGIONAL REPRESENTATIVE Christine McHale, Kimberli Foulkes, and Ryan Novak	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) JANET VIARO		
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 6/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 
		DATE 6/14/10

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
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's reportable incident policy did not address procedures on prevention, reporting, notification, investigation, and management of reportable incidents.	6/1/10	Reportable incident policy has been revised to address procedures on prevention, reporting, notification, investigation & management of reportable incidents. Administrator will review policy on a quarterly basis to ensure policies in compliance to regulation. This will be part of Quality Management Plan (QMP)	6/14/10

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

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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Janet Virgo</i>	DATE 6/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 6/14/10

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<p>22a1, 224a</p> <p>22a1 The following admission document shall be completed for each resident - Preadmission screening completed prior to admission on a form specified by the Department.</p> <p>224a A determination shall be made within 30 days prior to admission and documented on the Department's</p>	<p>-The preadmission screening for resident #1, admitted 4/23/10, dated 4/23/10 did not include whether or not the needs of the resident could be met by the home.</p> <p>-The preadmission screening for resident #2, admitted 10/30/09, was not dated and did not include whether or not the needs of the resident could be met by the home.</p> <p>-The preadmission screening for resident #3, admitted 2/20/10, was not dated, did not list who</p>	6/11/10	<p>The preadmission screening for all residents have been reviewed and updated to reflect dates & that their needs can be met by the home.</p> <p>Administrators will be more careful and review all records on a quarterly basis to ensure records are properly and completely filled out in order to be in compliance with department's policy & procedures of regulation</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>Date: 6/14/10 Initials (DPW): <i>[Signature]</i></p>

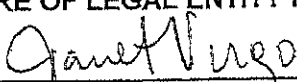
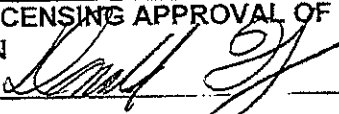
Administrators will review all future admissions to assure compliance
EV
6/14/10

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

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preadmission screening form that the needs of the resident can be met by the services provided by the home.	<p>completed the form, was not signed by the person completing the form, and did not include whether or not the needs of the resident could be met by the home.</p> <p>-The preadmission screening for resident #4, admitted 3/1/10, did not include the resident's ADL, IADL, and medical needs and did not include whether or not the needs of the resident could be met by the home.</p> <p>-The preadmission screening for resident #5, admitted 6/10/09,</p>	6/1/10	<p>Preadmission screening of all residents have been updated to reflect that their ADL & IADL also medical needs are met by home.</p> <p>All records will be reviewed on a quarterly basis to ensure home is in compliance with regulations.</p> <p>This will be part of the Quality Management Plan (QMP)</p>	

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	dated 6/10/09 did not include whether or not the needs of the resident could be met by the home.			

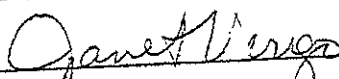
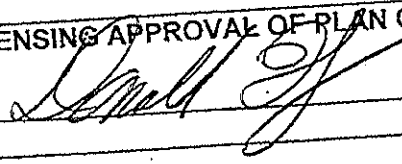
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22a3, 225a 22a3 The following admission document shall be completed for each resident - Personal care home assessment completed within 15 days after admission on a form specified by the Department. 225a A resident shall have a written initial assessment that is documented on the	Resident #2 was admitted to the home on 10/30/09. The resident's assessment was completed on 10/28/10.	5/7/10	Resident #2 folder was reviewed but did not see a date of 10/28/10 any where. Resident was admitted Administrators will oversee all future admissions to ensure assessments are completed as required by this regulation G V 6/14/10	Steps have been taken to correct violation; full compliance is not verifiable 6/14/10 Date: <i>[Signature]</i> Initials (DPW)

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Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.				

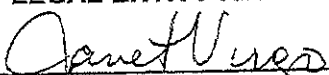

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<p>22a4, 227a</p> <p>22a4 The following admission document shall be completed for each resident - Support plan developed and implemented within 30 days after admission.</p> <p>227a A resident requiring personal care services shall have a written support plan developed and implemented within 30 days of admission to the home. The support</p>	<p>-The support plan for resident #2 who was admitted to the home on 10/30/09 was not dated making it impossible to determine if it was completed timely.</p> <p>-The support plan for resident #7 who was admitted to the home on 3/26/10 was not dated making it impossible to determine if it was completed timely.</p>	5/31/10	<p>Support plans for residents have been reviewed and updated to reflect correction of dates: Administrator will be more careful to review all records to ensure forms are filed in its entirety. Training will be provided for staff in the proper filing out of paperwork. Administrator will conduct monthly audits to assure ongoing compliance</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>6/14/10 Date Initials (DPW) <i>[Signature]</i></p>

GV
 6/14/10

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plan shall be documented on the Department's support plan form.				

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25b The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.	-Resident #2's contract dated 10/30/09 was no signed by the administrator or designee. -Resident #3's contract dated 2/20/10 was not signed by the administrator or designee. REPEAT VIOLATION- 4-22-09 et. al	5/31/10	Contract for residents were reviewed and signed by designated staff. Administrator will review records on a quarterly basis to ensure conformity to regulations. This process will be ongoing and will be part of Quality Management Plan (QMP). Administrator will oversee development of all future contracts to ensure compliance with this regulation <i>[Signature]</i>	6/14/10 <i>[Signature]</i>

[Signature]
6/14/10

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

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25c1 The contract shall specify that each resident shall retain, at a minimum, the current personal needs allowance as the resident's own funds for personal expenditure.	Resident #6 is a recipient of SSI. Resident #6's contract dated 10/20/04 lists the personal needs allowance as \$60. There is no addendum to state the current PNA of \$85.	5/7/10	The mother of resident #6 is Representative payee. For that reason PNA was not updated to reflect change from \$60 to \$85.00. However, a letter from mother is placed in folder stating that information enclosed is a copy of said note. Necessary corrections made to resident's contract. All future contracts to assure ongoing compliance.	6/14/10 <i>[Signature]</i>

[Signature]
6/14/10

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25d-1SOP The resident-home contract must include whether the home collects a portion of a resident's rent rebate under § 2600.25(d) (relating to resident-home contract).	-Resident #7's rent rebate addendum does not include whether or not the home collects a portion of the resident's rebate.	5/8/10	The rent rebate addendum has been completed to reflect home collects a portion. All records will be reviewed on a quarterly basis by administrator or designated staff to be in compliance with regulation. This will be part of QMP.	6/14/10 @

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25d-2SOP If the home collects a resident's rent rebate, the resident-home contract must include the dollar amount or percentage of the rent rebate to be collected.	The home does collect a portion of the residents' rent rebate. The rent rebate addendum for residents #1, 2 and 3 does not include the amount or percentage of the rent rebate to be collected.	6/1/10 6/17/10 a	All residents record have been updated to reflect home collects portion of residents rent rebate @ 50%. Designated staff, Admin will be responsible to ensure conformity to regulation This will be part of QMP Administrators will assure all information required by this regulation is in all residents records by 6/17/10 J 6/14/10	Steps have been taken to correct violation; full compliance is not verifiable 6/14/10 6/14/10 Date Initials (DPW)

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25d-3SOP If the home collects a resident's rent rebate, the resident-home contract must include the home's intended use of the revenue collected from the rent rebate.	The home does collect a portion of the residents' rent rebate. The rent rebate addendum for residents #1, 2 and 3 does not include the intended use of the revenue.	6/1/10	Residents' records have been updated to reflect intended use of rent rebate. In an effort to be in compliance with regulations, administrator will ensure all records are reviewed quarterly to reflect home is in compliance. This process will be part of QMP <i>Administrator will assure</i>	Steps have been taken to correct violation; full compliance is not verifiable 6/14/10 Date Initials (DPW) <i>[Signature]</i>

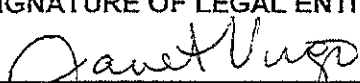

all information required by then regulation is in all records made by 6/17/10
[Signature] 6 14 10

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

NAME AND ADDRESS OF PERSONAL CARE HOME Wainut Manor 5032 Walnut Street, Philadelphia, PA 19139		CURRENT LICENSE NUMBER 117190	
INSPECTION DATE(S) (Include all dates of the inspection) May 7, 2010		REGIONAL REPRESENTATIVE Christine McHale, Kimberli Foulkes, and Ryan Novak	
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>Ganet Virgo</i>	DATE 6/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 6/14/10

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
25d-4SOP A statement signed by the resident, and the resident's designated person if applicable, at the time of admission, informing the resident that the information required in the rent rebate statement of policy is to be kept in the resident's record.	The records for residents #4 and 6 did not have a rent rebate addendum.	6/11/10	All records for residents have be updated to reflect rent rebate addendum. Administrator & designated staff will review records on a quarterly basis to ensure records are in compliance with regulations. This will be part of QMP.	6/14/10 <i>[Signature]</i>

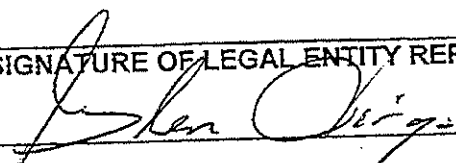
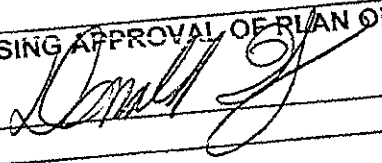
VIOLATION REPORT
PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600


NAME AND ADDRESS OF PERSONAL CARE HOME Walnut Manor 5032 Walnut Street, Philadelphia, PA 19139		CURRENT LICENSE NUMBER 117190
INSPECTION DATE(S) (Include all dates of the inspection) May 7, 2010	REGIONAL REPRESENTATIVE Christine McHale, Kimberli Foulkes, and Ryan Novak	
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		DATE 6/14/10

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
51, 52 51 Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (OAPSA) (35 P.S. §§ 10225.101-10225.5102) and 6 Pa.Code Chapter 15 (protective services for older adults). 52 Hiring, retention and utilization of staff persons shall be in accordance with	-The criminal history check dated 3/1/10 for Ancillary staff member A hired on 3/2/10 states that the request is under review. -The criminal history check dated 1/20/09 for direct care staff member B hired on 1/20/09 states that the request is under review. Also, direct care staff member B resided out of state and returned to Pennsylvania in January 2009. The home did not complete an FBI check. REPEAT VIOLATION- 4-22-09 et. al	6/3/10	Attached is an explanation why criminal background check stated under review for Staff A & B. Staff B was out of state from August 2008 to November 2008 due to family emergency. An FBI check has been requested. In an ongoing effort to be in compliance all records	Steps have been taken to correct violation; full compliance is not verifiable 6/23/10 Date Initials (DPW)

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

NAME AND ADDRESS OF PERSONAL CARE HOME Walnut Manor 5032 Walnut Street, Philadelphia, PA 19139	CURRENT LICENSE NUMBER 117190
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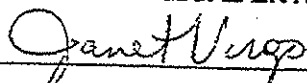

SIGNATURE OF LEGAL ENTITY REPRESENTATIVE 	DATE 6/14/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 6/14/10
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1 REGULATION 55 Pa.Code § 2600.	2 VIOLATION	3 DATE BY WHICH CORRECTION WILL BE COMPLETED	4 PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	5 DATE COMPLIANCE VERIFIED BY DPW
the Older Adult Protective Services Act (35 P.S. §§ 10225.101—10225.5102) and 6 Pa.Code Chapter 15 (protective services for older adults) and other applicable regulations.			of staff will clearly state status of background. Current staff will be retained and future staff hired in accordance with all provisions of OAPSA.  6/14/10	

Addendum to pages 15 & 16

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

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P. 03 NAME AND ADDRESS OF PERSONAL CARE HOME Walnut Manor 5032 Walnut Street, Philadelphia, PA 19139		CURRENT LICENSE NUMBER 117190
INSPECTION DATE(S) (Include all dates of the inspection) May 7, 2010	REGIONAL REPRESENTATIVE Christine McHale, Kimberli Foulkes, and Ryan Novak	
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 6/16/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 
		DATE 6/17/10

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
51, 52. Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (OAPSA) (35 P.S. §§ 10225.101-10225.5102) and Pa.Code Chapter 15 protective services for older adults).	-The criminal history check dated 3/1/10 for Ancillary staff member A hired on 3/2/10 states that the request is under review. -The criminal history check dated 1/20/09 for direct care staff member B hired on 1/20/09 states that the request is under review. Also, direct care staff member B resided out of state and returned to Pennsylvania in January 2009. The home did not complete an FBI check. REPEAT VIOLATION- 4-22-09 et. al	6/16/10	Addendum to citation Criminal records obtained for staffs 'A' & 'B' codes listed for staff 'B' is prohibited under OAPSA. Staff B will be terminated as of 6/16/10 Code listed for staff 'A' is unclear. It did not contain all required information. Further inquiries will be done	

02/13/09 09:40AM HP LASERJET FAX 51

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

Addendum to page 154/16
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P. 04

NAME AND ADDRESS OF PERSONAL CARE HOME Walnut Manor 5032 Walnut Street, Philadelphia, PA 19139		CURRENT LICENSE NUMBER 117190	
INSPECTION DATE(S) (Include all dates of the inspection) May 7, 2010		REGIONAL REPRESENTATIVE Christine McHale, Kimberli Foulkes, and Ryan Novak	
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>Jane Virep</i>	DATE 6/16/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 6/17/10

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
personal care services with reasonable skill and safety. <i>q</i>			To get a history criminal history check that makes clear her eligibility for employment under OAPSA is on file. She will be suspended as of 6/16/10. Home has submitted documentation showing staff person A to work under provisions of OAPSA. That staff person has been returned to the schedule.	

DPH 6/17/10

HP LASERJET FAX

02/13/09 09:40AM

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

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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Janet Vugo</i>	DATE 6/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>
		DATE 6/14/10

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
<p>54a Direct care staff persons shall have the following qualifications:</p> <p>(1) Be 18 years of age or older (exception – 54b). (2) Have a high school diploma, GED diploma or active registry status on the Pennsylvania nurse aide registry. (3) Be free from a medical condition, including drug or alcohol addiction that would limit the staff person from providing necessary</p>	<p>Direct care staff member B did not have proof of a high school diploma, GED, or active registry status on the PA nurse aide registry.</p>	<p>6/3/10</p>	<p>Direct staff B has been enrolled in a GED program - She has taken her test and is awaiting result. Staff was hired based on her background & experience working for Action Aid. She is excellent with residents. Helps them to build morale. Residents are respected and well taken care of by her. She has reasonable skills which enables her</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>6/14/10 Date: _____ Initials (DPW) _____</p>

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

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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
personal care services with reasonable skill and safety.			<p>to provide excellent care to residents. She helps to diffuse any situation and conflicts that residents may have. She works well with PCP's, ICM and Resource Coordinators.</p> <p>She will be signing up for her CVA certificate in the summer.</p> <p>Staff member B has completed C&D program & is awaiting diploma. Copy of that diploma will be submitted to the Department by 6/30/10. Staff person B will not be employed past 6/30/10 if they are unable to produce required documentation. GV 6/14/10</p>	

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

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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Janet Hugo</i>	DATE 6/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 6/14/10

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
82a Poisonous materials shall be stored in their original, labeled containers.	An unlabeled bottle of cleaner was found in Bathroom B on the third floor of the home. The cleaner was later identified by staff as "Creolin."	5/7/10	Unlabeled bottle of cleaner was removed from bathroom. Staffs have been instructed not to leave any thing unattended. In an ongoing effort the home will ensure no poisonous material are left unlocked; administrator will monitor daily to prevent violation from repeating. This will be part of Q.M.P.	6/14/10 <i>[Signature]</i>

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

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			DATE 6/14/10

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
82c Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.	An unlabeled bottle filled with "Creolin" cleaner was found unlocked in Bathroom B on the home's third floor. The label for this substance states that if ingested, "seek medical attention immediately." Residents #1, 2, 3, 4, 5, 6, and 7 have not been assessed to safely use or avoid poisonous materials.	5/7	<p>cleaning substance was removed and safely stored in locked area accessible only by staff & administrator</p> <p>residents in the home are able to avoid poisonous materials.</p> <p>Administrator will daily monitor housekeeping staff to ensure no poisonous material is left unattended</p>	6/14/10 <i>[Signature]</i>

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

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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Janet Vargo</i>	DATE 6/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Donald J.</i>	DATE 6/14/10

1	2	3	4	5
REGULATION 55 Pa.Code § 2600.	VIOLATION	DATE BY WHICH CORRECTION WILL BE COMPLETED	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)	DATE COMPLIANCE VERIFIED BY DPW
85a Sanitary conditions shall be maintained.	The home keeps a cooler of water in the dining room for residents use. The home provides the residents with plastic cups. Multiple residents were observed using the same cups throughout the day.	8/1/10	A water cooler will be installed to maintain sanitary conditions. In the meantime disposable cups have been made available. Staff will remove used cups to ensure sanitary conditions are maintained. This will be ongoing until cooler is installed. Administrator will monitor and staff will ensure compliance.	6/14/10 <i>DP</i>

DP
6/14/10

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PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

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85e Trash outside the home shall be kept in covered receptacles that prevent the penetration of insects and rodents.	-Four large black garbage bags were found on the front porch of the home and were not in covered receptacles. -A large clear bag of trash was found on the back porch of the home and was not in a covered receptacle.	6/14/10	Trash cans have been used to replace large trash bags. All trash will be in covered receptacles as an ongoing process to be in compliance with regulations. Administrator will ensure that all trash will be in covered receptacles.	6/14/10 CA

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PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

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101j7 Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on/off at bedside.	Resident #5 did not have a lamp that was accessible from bedside.	5/7/10	Each resident has lamp that is accessible from bedside. Administrator will create checklist to ensure compliance of regulations. List will be verified daily to ensure conformity to regulations. This will be verified by administrator will be an ongoing process	6/14/10 <i>[Signature]</i>

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

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103d Food shall be stored off the floor.	A 50-lb. bag of potatoes was being stored on the floor of the dining room to the left of the kitchen door.	5/7/10	<p>Food's have been stored off the floor. Administrator will put food away in appropriate place once it is brought to the home. This will be an ongoing process to ensure compliance to regulation and to prevent a repeat violation.</p> <p><i>Administrator/Designer will inspect home daily to assure ongoing compliance</i></p>	6/14/10 <i>[Signature]</i>

GV
6/14/10

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

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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>James Hugo</i>		DATE 6/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>
			DATE 6/14/10

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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.	There was no thermometer in the large freezer near the back door of the home's basement.	6/1/10	Thermometer has been placed in freezer. This will remain intact to ensure proper temperature for storing and proper & safe preservation of food. Administrators & staff will monitor to ensure that thermometer is operable. This process will be ongoing to prevent repeats to be in compliance with regulations.	6/14/10 <i>[Signature]</i>

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PERSONAL CARE HOMES – 55 Pa.Code Chapter 2600

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103g Food shall be stored in closed or sealed containers.	Two waffles and one roll not in any container, a bag of rolls with multiple holes and rolls poking through the bag were found in the large freezer at the bottom of the stairs in the home's basement.	5/7/10	All foods are placed in sealed containers. Administrator and designated staff will check freezer to make sure no food is loose and out of container that is labeled. This will be an ongoing process to ensure violation is not repeated. <i>Administrator/designee will report home back to ensure ongoing compliance</i>	6/14/10 #

[Signature]
6/14/10

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

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103i Outdated or spoiled food or dented cans may not be used.	-A package of codfish was found unlabeled and undated in the large freezer at the bottom of the stairs in the home's basement. -Two packages of waffles were found unlabeled and undated in the large freezer near the back door of the home's basement.	5/7/10	All unlabeled & undated food will be were removed from freezer. Designated staff and administrator will ensure all food are labeled and open packages will be labeled & dated. Freezers will be cleaned one per month and all packages will be labeled & dated.	6/14/10

Administrator Vargo will expect home staff to ensure future compliance. JUV 6/14/10

VIOLATION REPORT
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INSPECTION DATE(S) (Include all dates of the inspection) May 7, 2010		REGIONAL REPRESENTATIVE Christine McHale, Kimberli Foulkes, and Ryan Novak	
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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Janet Hugo</i>	DATE 6/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>J. Small</i>	DATE 6/14/10

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.	<p>-The walkways in the rear of the home that exit from the property to the street were covered in debris, had overgrown trees blocking the walkway; and had fencing in the neighbor's home that is in disrepair and sticking out 1 foot into the walkway.</p> <p>-A wooden knee-height gate is attached to the top of the stairs that go to the home's second floor outside of resident room #2 to the fire exit. When the gate is opened it obstructs resident room #2 and blocks the exit.</p>	5/31/10	<p>City was contacted about debris in alleyway. Repres Representative said someone will get back to us. In the meantime we have removed obvious debris, trimmed tree limbs that overhang the property. Administrator will ensure that all means of egress will be clear & free from obstruction. This will be monitored on a regular basis via walk inspections</p>	6/14/10 <i>JM</i>

*by administrator. (knee high gate referenced in violation has been removed)
 J ✓ 6/14/10*

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

NAME AND ADDRESS OF PERSONAL CARE HOME Walnut Manor 5032 Walnut Street, Philadelphia, PA 19139		CURRENT LICENSE NUMBER 117190
INSPECTION DATE(S) (Include all dates of the inspection) May 7, 2010	REGIONAL REPRESENTATIVE Christine McHale, Kimberli Foulkes, and Ryan Novak	
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>Janet Vago</i>	DATE 6/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>
		DATE 6/14/10

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
141a-2 The medical evaluation shall include the following: (6) Immunization history. (7) Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.	-Resident #2's medical evaluation dated 10/29/09 stated "see attached" for medications. There were no attachments to the document. -Resident #7's medical evaluation dated 3/24/10 does not include the resident's immunization history.	6/14/10	<i>Administrators will require all future medical evaluation to be sure all required info are included</i> <i>JV 6/14/10</i>	Steps have been taken to correct violation; full compliance is not verifiable 6/14/10 Date Initials (DPW)

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

NAME AND ADDRESS OF PERSONAL CARE HOME Walnut Manor 5032 Walnut Street, Philadelphia, PA 19139	CURRENT LICENSE NUMBER 117190
INSPECTION DATE(S) (Include all dates of the inspection) May 7, 2010	REGIONAL REPRESENTATIVE Christine McHale, Kimberli Foulkes, and Ryan Novak
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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Gaiet Hugo</i>	DATE 6/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 6/14/10
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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
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 Nyquil cold and flu was found on the dresser near by the window in resident room G. -Two bottles of rubbing alcohol were found on the night stand of the bed on the left in resident #5's room.	5/7/10	Items have been removed from residents room. Residents have been advised not to keep anything on their table. If they have questions and concern they need to see staff or administrator. Administrator staff will monitor rooms to ensure no form of medications nor unauthorized material or OTC medication is left in rooms nor bathrooms. This will be part of QM P. <i>Monitoring will include staff inspections by administrator/inspector</i>	6/14/10 <i>[Signature]</i>

[Signature]
6/14/10

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

NAME AND ADDRESS OF PERSONAL CARE HOME Walnut Manor 5032 Walnut Street, Philadelphia, PA 19139		CURRENT LICENSE NUMBER 117190	
INSPECTION DATE(S) (Include all dates of the inspection) May 7, 2010		REGIONAL REPRESENTATIVE Christine McHale, Kimberli Foulkes, and Ryan Novak	
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SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Janet Vueso</i>	DATE 6/5/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 6/14/10

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
221c A current weekly activity calendar shall be posted in a conspicuous and public place in the home.	The home's activity calendar was not posted.	5/7/10	Activity calendar was posted in Dining room. Going forward one will be posted in dining room & sitting areas. Designated staff & administrator will ensure conformity to regulations. This will be part of QMP.	6/14/10 <i>[Signature]</i>

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

NAME AND ADDRESS OF PERSONAL CARE HOME Walnut Manor 5032 Walnut Street, Philadelphia, PA 19139		CURRENT LICENSE NUMBER 117190	
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252 Each resident's record shall include the following information: (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.	-The record for resident #1 did not include a photograph, the resident's hair color, eye color and any identifying marks. -The records for residents #2, 3, 4, 5, 6 and 7 did not include the residents' hair color, eye color, and any identifying marks. REPEAT VIOLATION- 4-22-09 et. al	5/10/10	All record for residents have now been updated to reflect, photograph, eye & hair color. Designated staff and administrator will ensure incoming residents have required information in folder that will properly identify them. This will be part of maintaining compliance.	Steps have been taken to correct violation; full compliance is not verifiable 6/14/10 Date Initials (DPW) <i>[Signature]</i>

Administrators will conduct monthly record reviews to ensure ongoing compliance
[Signature]
 6/14/10