



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
Norristown State Hospital
1001 Sterigere 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: November 17, 2010

Ms. Mary Anne Parisse, Administrator
Philadelphia Protestant Home
Building 5
6500 Tabor Road, Midway Manor
Philadelphia, Pennsylvania 19111

Dear Ms. Parisse:

As a result of the Department of Public Welfare's licensing inspection on July 9, 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,

A handwritten signature in black ink that reads "JAMES JESSE Hummel". The signature is written in a cursive style with a large, stylized "H" and "M".

James Jesse Hummel
Acting Regional Licensing Representative

Enclosure(s)
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME The Philadelphia Protestant Home 6500 Tabor Avenue Philadelphia Pa 19111		CURRENT LICENSE NUMBER 144500	
INSPECTION DATE(S) (Include all dates of the inspection) July 9, 2010		REGIONAL REPRESENTATIVE James Jesse Hummel and Christine McHale	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Mary Ann Porisse, Administrator</i>			
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE <i>Mary Ann Porisse</i>	DATE <i>9/23/10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE <i>9/27/10</i>

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
63d A staff person who is trained in first aid or certified in obstructed airway techniques or cardiopulmonary resuscitation shall provide such services in accordance with their training, unless the resident has a "do not resuscitate" order.	On 6/17/10 direct care staff person A was making rounds and found resident #1 lying in bed with no pulse or respirations. Direct care staff person A is trained in CPR, but did not administer CPR. Resident #1 does not have a Do Not Resuscitate order.	7/31/10 and ongoing	This particular incident was an oversight that the Resident did not have a signed DNR order in [redacted] chart. [redacted] did have a Living Will that stated [redacted] did not want CPR. When Staff member A entered room, Resident was lying in bed without a palpable pulse, audible heart-beat, no respirations, skin cold to touch. Staff member A immediately contacted Supervisor, who brought over chart with Living Will. Burholme Ambulance pronounced Resident deceased (see report from EMTs). Going forward, all Residents have been informed if they do not want CPR, they must have a DNR order in their chart, signed by the doctor and themselves (see attached form). If a Resident does not have a signed DNR order in their chart, they will receive CPR, as per reg.	Steps have been taken to correct violation; full compliance is not verifiable <i>9/27/10</i> Date <i>CMH</i> Initials (DPW)