

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to CHRISTIAN LIFE SERVICES, INC.

LEGAL ENTITY

To operate CHRISTIAN LIFE SERVICES

NAME OF FACILITY OR AGENCY

Located at 3408 -10 NORTH 19TH 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 44
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 January 3, 2011 until May 3, 2011,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 132792

Robert E. Robinson

ISSUING OFFICER

Kenneth 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
MAILING DATE: JAN 12 2011

Mr. Erwin Warfield, Administrator
Christian Life Services, INC.
2400 West Lehigh Avenue
Philadelphia Pennsylvania 19132

RE: Christian Life Services
3408-10 North 19th Street
Philadelphia Pennsylvania 19140

Dear Mr. Warfield:

As a result of the Department of Public Welfare's (Department) licensing inspection on October 28, 2010 and November 1, 2010 of the above personal care home, we found that violations specified for your previous PROVISIONAL license have not been corrected and we found new violations not found during our previous inspection.

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

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	III	34	\$3	\$102	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, 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:

Ronald Melusky, Acting Director
 Adult Residential Licensing
 Department of Public Welfare
 423 Health and Welfare Building
 Seventh and Forster Streets
 Harrisburg, Pennsylvania 17120

Mr. Erwin Warfield

3

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,

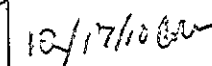
A handwritten signature in black ink, appearing to read "K. Casey". The signature is fluid and cursive, with a long horizontal stroke at the end.

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 CHRISTIAN LIFE SERVICES, 3408 10 NORTH 19TH STREET PHILADELPHIA, PA 19140		CURRENT LICENSE NUMBER 132791	
INSPECTION DATES (Include all dates of the inspection) 10/28/2010, 11/11/2010		REGIONAL REPRESENTATIVE Christine McHale, James Hummel, Chevon Mitchell	
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 	DATE 11/29/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 12/14/10

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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
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.	On 10/28/10 and 11/11/10, the home's current violation report was not posted in a conspicuous and public place in the home.	11/26/10	<p>Home purchased located Bill Board <small>CEM 12/14/10</small> to mounted on wall in a conspicuous + public place in Ave by Dec. 15, 2010 Administrators will monitor (monthly) Violator Reports to make sure current is posted.</p>	12/17/10 

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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 <i>Shaeel Lopez</i>	DATE <i>11/29/10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Chevon Mitchell</i>	DATE <i>12/14/10</i>

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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
41c The Department's poster of the list of resident's rights shall be posted in a conspicuous and public place in the home.	The Department's resident's rights poster is not posted in a conspicuous and public place in the home.	<i>11/26/10</i>	<i>Resident's Rights will be displayed in locked Bell Board and monitored by staff weekly</i> <small>CCM 12/14/10</small>	<i>12/17/10 CCM</i>

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

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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 <i>Shirrell Taylor</i>	DATE <i>11/29/10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Chevon Mitchell</i>	DATE <i>12/14/10</i>

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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
42o A resident has the right to freely associate, organize and communicate with others privately.	The home rules, as listed in the residents' contract, state, "Male residents are not permitted to visit with female residents in their bedrooms," and, "Visitors are not permitted to socialize with the residents in their bedrooms. Activity must be confined to the first floor of the house or outside of the house."	<i>11/15/10</i>	<p><i>All Residents Charts have been reviewed and corrected for all errors made in charts.</i></p> <p><i>All Charts containing old home rules have been corrected.</i></p> <p><i>Administrator will have all Charts corrected by Dec 15, 2010 and Month Monthly for Errors. Residents will receive a 30 day written notice of this change.</i></p>	<p><i>12/17/10 cm</i></p>


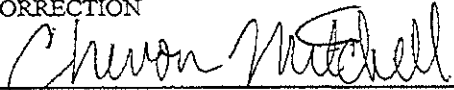
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VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

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SIGNATURE OF LEGAL ENTITY <i>Sherrill Taylor</i>	DATE <i>11/29/10</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Chevon Mitchell</i>	DATE <i>12/14/10</i>

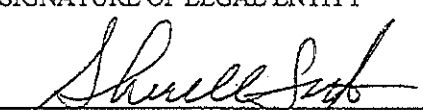

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<p>51/52</p> <p>Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. §§ 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).</p> <p>Hiring, retention and utilization of staff persons shall be in accordance with the Older Adult Protective Services Act (35 P. S. §§ 10225.101—10225.5102) and 6 Pa. Code Chapter 15</p>	<p>Direct care staff member A, hired on 2/24/10, had a criminal history background clearance completed on 2/24/10. The criminal history background clearance stated "Under Review." It could not be determined if this staff member has any prohibited offenses under the Older Adult Protective Services Act.</p> <p>Repeated Violation - 6/24/10, et al</p>	<p><i>11/14/10</i></p>	<p><i>Criminal History background Clearance for Staff A has been added to Staff A's Folder. Home as hired an office assistant to help with files and paperwork. All Staff Files will be monitored monthly. Any New hires will NOT be permitted to work until a clear Criminal Background Check is complete.</i></p> <p style="text-align: right;"><i>Done 12/14/10</i></p>	<p style="text-align: center;">Steps have been taken to correct violation; full compliance is not verifiable</p> <p style="text-align: center;"><i>12/14/10</i> Date</p> <p style="text-align: center;">Initials (DPW) <i>DPW</i></p>

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(relating to protective services for older adults) and other applicable regulations.				

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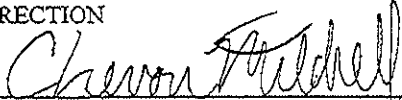
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63a At least one staff person for every 50 residents who is trained in first aid and certified in obstructed airway techniques and CPR shall be present in the home at all times.	On 10/2/10, 10/3/10, 10/9/10, 10/10/10, 10/23/10, and 10/24/10, from 9:00 pm - 9:00 am, 34 residents were present in the home. During this time, no staff persons were present in the home who were certified in first aid, obstructed airway techniques, and CPR.	11/3/10	<p><i>Staff Person have been Trained for first aid / CPR. Administrator will Monitor Monthly to make sure Staff is on every shift has CPR/first aid trainings at all times</i></p>	12/17/10 <i>CMW</i>

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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 emergency	<ul style="list-style-type: none"> - Ancillary staff person B, whose first day of work was 10/4/10, did not receive orientation in general fire safety and emergency preparedness. - Ancillary staff person C whose first day of work was 9/27/10, did not receive orientation in general fire safety and emergency preparedness. - Ancillary staff person D whose first day of work was 9/27/10, did not receive orientation in general fire safety and emergency preparedness. - Ancillary staff person E whose first day of work was 9/27/10, did not receive orientation in general fire safety and emergency preparedness. - Direct care staff person F, whose first day of work was 9/27/10, did not receive orientation in general fire safety and emergency preparedness. 	<ul style="list-style-type: none"> <i>11/15/10</i> <i>11/18/10</i> <i>11/17/10</i> <i>11/22/10</i> 	<p><i>Staff mentioned in Violations are no longer with Home</i></p> <p><i>All current staff was retained with new training packets which includes 65A, 65B, 65d, 65g and 65E</i></p> <p><i>Administrative will train All New Staff Prior to Hire date or on Hire date will be trained on the above Training</i></p>	<p><i>12/17/10</i></p> <p><i>com</i></p>

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location if applicable. (3) The designated meeting place outside the building or within the firesafe 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.				

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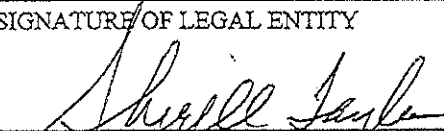
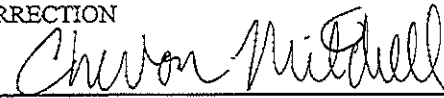
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65b Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following: (1) Resident rights. (2) Emergency medical plan. (3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P. S. §§ 10225.101—10225.5102). (4) Reporting of reportable incidents	<ul style="list-style-type: none"> - Ancillary staff person B, whose first day of work was 10/4/10, did not receive training on resident rights, emergency medical plans, mandatory reporting of abuse under OAPSA, and reportable incidents. - Ancillary staff person C whose first day of work was 9/27/10, did not receive training on resident rights, emergency medical plans, mandatory reporting of abuse under OAPSA, and reportable incidents. - Ancillary staff person D whose first day of work was 9/27/10, did not receive training on resident rights, emergency medical plans, mandatory reporting of abuse under OAPSA, and reportable incidents. - Ancillary staff person E whose first day of work was 9/27/10, did not receive training on resident rights, emergency medical plans, mandatory reporting of abuse under OAPSA, and reportable incidents. - Direct care staff person F, whose first day of work was 9/27/10, did not receive training on 		<p>Staff mentioned in Violation are no longer with the Home. All current staff were trained with New training packet which includes 65A, 65B, 65C, 65D and 65E. The Administrator will train all New Staff prior to hire date or on hire date.</p> <p align="right">CRM 12/14/10</p>	12/17/10 on

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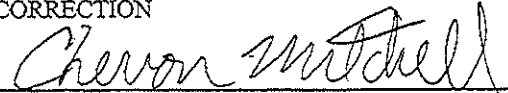
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and conditions.	resident rights, emergency medical plans, mandatory reporting of abuse under OAPSA, and reportable incidents.			

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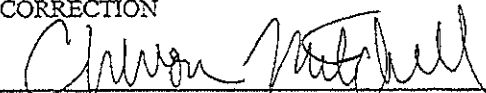
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65c Ancillary staff persons shall have a general orientation to their specific job functions as it relates to their position prior to working in that capacity.	<ul style="list-style-type: none"> - Ancillary staff person B, who began work on 10/4/10, did not receive a general orientation to their job functions. - Ancillary staff person C, who began work on 9/27/10, did not receive a general orientation to their job functions. - Ancillary staff person D, who began work on 9/27/10, did not receive a general orientation to their job functions. - Ancillary staff person E, who began work on 10/4/10, did not receive a general orientation to their job functions. 		<p>Staff mentioned in violation are no longer with the home. All current staff were trained with new training packet which includes a general orientation to their specific job functions. The administrator will train all new staff prior to their hire date. Com 12/14/10</p>	12/17/10 em

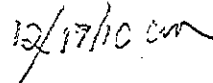
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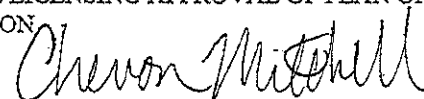
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101j1 Each resident shall have the following in the bedroom: A bed with a solid foundation and fire retardant mattress that is in good repair, clean and supports the resident.	The mattress on the bed on the right side towards the rear of resident room #1B was not in good repair. The head of the bed was not level with the foot of the bed. The mattress was at a slant towards the headboard that made it difficult for the resident in the bed to get up.	11/1/10	Home has replaced a new mattress and box spring. Staff will monitor daily to make sure all beds are level and report any damages or problems to administrators immediately for ^{all} replacements and repairs.	12/17/10 CM

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

NAME AND ADDRESS OF PERSONAL CARE HOME CHRISTIAN LIFE SERVICES, 3408 10 NORTH 19TH STREET PHILADELPHIA, PA 19140		CURRENT LICENSE NUMBER 132791	
INSPECTION DATES (include all dates of the inspection) 10/28/2010		REGIONAL REPRESENTATIVE Christine McHale, James Hummel, Chevon Mitchell	
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101j2 Each resident shall have the following in the bedroom: A chair for each resident that meets the resident's needs.	Bedroom 8A has 4 residents but only 3 chairs.	11/1/10	4th chair was added day of inspection. Staff will monitor daily and let administrator know asap to report any damages or changes in each room. Room Checklist was put in place for all staff.	12/17/10 

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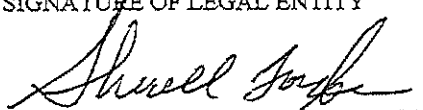

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101j6 Each resident shall have the following in the bedroom: A mirror.	Four residents reside in bedroom 8A. There was only one mirror for the four residents.	11/2/10	<p><i>additional mirrors were added to Residents room</i></p> <p><i>Staff will monitor daily to ensure all mirrors are in place and report any changes or damage right away to administrator to be replaced or repaired as needed.</i></p>	12/1/10 <i>am</i>

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

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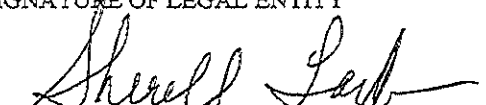
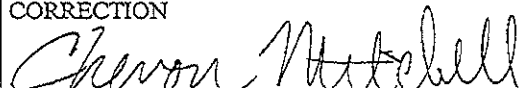
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101j7 Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on/off at bedside.	<ul style="list-style-type: none"> - The bedside lamp near the middle bed in bedroom 5A was inoperable. - There was no bedside lamp near the bed on the right side of bedroom 6B. The lamp next to the bed on the left side of bedroom 6B was not operable. - There was no bedside lamp near the bed in the rear of bedroom 9B. - Resident bedroom 8A has four beds. There were no bedside lamps near any of the beds. 	11/3/10	<p style="font-size: 1.2em; margin: 0;">all additional lamps were replaced and are operable staff will monitor and follow room check list + report any damage or replacement to administration as needed.</p>	12/17/10

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PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

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107c The home shall maintain at least a 3-day supply of nonperishable food and drinking water for residents.	On 11/1/10, the home had 34 residents, but only 83 gallons of emergency drinking water.	11/4/10	Home has purchased a 3 day supply of drinking water for all residents in Home staff ^{administrator} will monitor weekly and replace and supplies as needed.	12/17/10 cm

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

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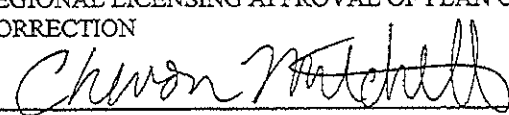
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141a A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission.	<ul style="list-style-type: none"> - Resident #1 was admitted on 3/24/10. The resident's medical evaluation was completed on 5/17/10. - Resident #2 was admitted on 5/28/10. The resident's medical evaluation was completed on 7/14/10. 	11/18/10	<p style="font-size: 1.2em;">Administrator has implemented New policy that all prospective Clients must have a current Med evaluation which is within 30 days of application</p> <p>administrator will monitor all charts Monthly to and aft fcl to see resident within the 30 day of admissions of home to assure all resident has proper dates on Med. Eval.</p>	<p style="font-size: 0.8em;">Steps have been taken to correct violation; full compliance is not verifiable</p> <p style="font-size: 0.8em;">Date <u>12/17/10</u> Initials (DPW) <u>MM</u></p>

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

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REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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
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. (5) Allergies. (6) Immunization	<ul style="list-style-type: none"> - The medical evaluation for resident #3, dated 6/9/10, does not include allergies. - The medical evaluation for resident #4, dated 6/17/10, states, "please refer to Attach Med Sheet (MR)," for medications. The attachment is not signed and dated by the physician who completed the medical evaluation. - The medical evaluation for resident #5, dated 6/17/10, states, "please refer to Attach Med Sheet (MR)," for medications. The attachment is not signed and dated by the physician who completed the medical evaluation. 	<i>11/24/10</i>	<i>Doctor came to Home & reviewed and documented all known allergies as well as signed and dated med. eval. for medications. All attached Med Sheets have been updated and reviewed and signed by physician. Administrator will monitor monthly.</i>	Steps have been taken to correct violation; full compliance is not verifiable <i>[Signature]</i> Date Initials (DPW)	

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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.		11/15/10	Hired office asst. to check + maintain all Clients Medical & admin. Charts.	

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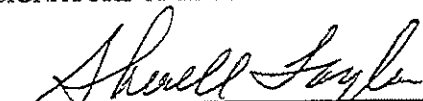
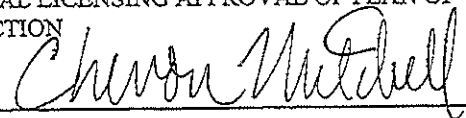
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162c Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.	On 10/28/10, the menu posted near the home's kitchen was for the time period of 10/17/10 to 10/23/10. The menu posted in the lounge next to the Administrator's office was for the time period of 8/22/10 to 8/28/10.	<i>11/29/10</i>	<p><i>All menus will be posted in Home's located Bell Bar ^{Room #11410} and Monitored by Staff Weekly for weekly dates for the current week will report all changes to Administrator for any changes needing to be made immediately</i></p>	<i>12/17/10</i>

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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.	On 10/28/10 at 10:00 am, 2 medium size cardboard boxes and one large green bin were found unlocked in the closet in the resident bathroom on the first floor next to the computer room. These boxes were full of at least one hundred resident prescription medications. Within these medications was Lisinopril 10 mg, Aspirin 81 mg, Citalprolam 40 mg, and Seroquel 300 mg for Resident #6; Benzotropine 0.5 mg, Carvedilol 12.5 mg, Risperdone 4 mg, Detrol LA 4 mg, Lisinopril HCTZ 20-12.5, Multivitamin, Hydroxyzine Pamoate 25 mg, Pot. Cl. Micro Tab 10 MeQ for Resident #7; Divalproex ER 250 mg, Metformin 500 mg, and Seroquel 100 mg for Resident #8; Ranitadine 150 mg for Resident #9; Metformin 500 mg, Omeprazole 20 mg, and Pravastin 40 mg for Resident #10; Citaprolam 20 mg, Diltezem Hydroc., Ducosil 100 mg, and Ferrous Sulfate 325 mg for Resident #11. There were many other additional medications for other residents within these boxes.	10/28/10 - 10/29/10	<i>All locks were replaced in home on all closet doors during inspection. Pharmacy pulled up all med listed on violation on 10/29/10 Staff will monitor all locks in Building daily and report to administrator immediately for all damage or replacements needed.</i>	<i>10/17/10 CEM</i>

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184b If the OTC medications and CAM belong to the resident, they shall be identified with the resident's name.	On 10/28/10, a package of Triple Antibiotic Ointment belonging to resident #12 was located in the medication cabinet and was not labeled with the resident's name.	10/28/10	<p>All medications were labeled with residents name day of inspection</p> <p>all over OTC medications + CAM that belong to residents will be labeled immediately with the residents name upon residents giving medications to the staff - Residents do Med tech and ask weekly if they have any OTC medications</p>	12/17/10 Cen

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185a The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.	The home's medication procedures state that narcotic medications will be counted and documented on each shift. Resident #1 is prescribed a narcotic, Endocet 5/325mg. The home is not counting and documenting the amount of this medication.	<i>11/26/10</i>	<i>Home will monitor + count all narcotics on each shift All Med Tech will be trained for this by 11/26/10 Administrator will monitor all narcotics weekly for counts + distribution, storage security and access on each shift.</i>	<i>12/17/10</i> Date Initials (DPW) <i>AM</i>

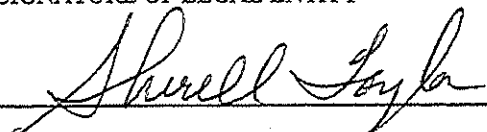

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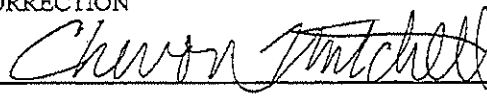
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191 The home shall educate the resident of his/her right to question or refuse a medication if he/she believes there may be a medication error. Documentation of this resident education shall be kept.	Residents 1, 2, 3 and 4 have not been educated to the resident's right to refuse medication if the resident believes that there may be a medication error.	<i>11/22/10</i>	<p><i>all residents have been educated on the right to refuse medication if they believe meds are an error. Administration will have a Monthly Education for all residents as well as new. The home's contract has been updated to include this right. All new residents will be educated at the time of admission. - DM 12/14/10</i></p>	<p><i>Steps have been taken to correct violation; full compliance is not verifiable</i></p> <p><i>12/14/10</i> Date</p> <p><i>DM</i> Initials (DPW)</p>	

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187a A medication record shall be kept to include the following for each resident for whom medications are administered: (1) Resident's name. (2) Drug allergies. (3) Name of medication. (4) Strength. (5) Dosage form. (6) Dose. (7) Route of administration. (8) Frequency of administration. (9) Administration times. (10) Duration of therapy, if applicable. (11) Special	- The medication administration record for resident #1 had the incorrect dosage and time for Endocet 5-325 mg. - The medication administration record for resident #2 does not include the resident's Benzotropine Mesylate 2 mg (1/2 tab). Repeated Violation - 6/24/10, et al	10/28/10	Spoke to #1 Doctor for correct dosage & time MAR has been corrected and Med tech will monitor weekly for any changes. An updated Ucd Training for all staff was done on 11/29/10 Resident #2's doctor advised the resident's medications. The resident's MAR has been updated to reflect all current medications. CM 12/14/10	12/17/10 CM

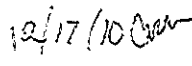
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precautions, if applicable. (12) Diagnosis or purpose for the medication, including pro re nata (PRN). (13) Date and time of medication administration. (14) Name and initials of the staff person administering the medication.				

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187b The information in subsections 187a13 and 187a14 shall be recorded at the time the medication is administered.	On 10/27/10, at 1:00 pm, resident #1's Gabapentin 300 mg was administered. The medication administration record was not initialed for this medication.	11/18/10	all staff has been retrained on administering meds. Administrator will monitor weekly all meds and Mars.	12/17/10 

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

NAME AND ADDRESS OF PERSONAL CARE HOME CHRISTIAN LIFE SERVICES, 3408 10 NORTH 19TH STREET PHILADELPHIA, PA 19140		CURRENT LICENSE NUMBER 132791	
INSPECTION DATES (Include all dates of the inspection) 10/28/2010		REGIONAL REPRESENTATIVE Christine McHale, James Hummel, Chevon Mitchell	
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 	DATE 11/29/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 12/14/10

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	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
224a A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.	The preadmission screening form for resident #2, admitted 5/28/10, which includes the determination that the home can meet the resident's service needs, is dated 4/19/10.	11/26/10	<p style="font-size: 1.2em;">This was a typographical error that has been corrected. All charts will be reviewed & checked for all errors and corrected by administrator by Dec 15, 2010.</p> <p>Administrator will check all preadmission screenings for completeness prior to admission. The home will not admit any residents until the preadmission screening is properly completed.</p>	<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Steps have been taken to correct violation; full compliance is not verifiable</p> <p style="text-align: right;">Date: 12/17/10 Initials: (DPW)</p>	12/14/10

CVM 12/14/10.