

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to CATHEDRAL VILLAGE

LEGAL ENTITY

To operate CATHEDRAL VILLAGE

NAME OF FACILITY OR AGENCY

Located at BUILDINGS A-L; 602 AND 604, 600 E. CATHEDRAL ROAD, PHILADELPHIA, PA 19128

(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 50  
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 March 30, 2012 until March 30, 2013,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **129530**

*Robert E. Robinson*

ISSUING OFFICER

*[Signature]*

DIRECTOR

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 - 01/11



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

APR 20 2012

Ms. Sue Siegfried, Director of Health Services  
Cathedral Village  
Buildings A-L; 602 and 604  
600 East Cathedral Road  
Philadelphia, Pennsylvania 19128

Dear Ms. Siegfried:

As a result of the Department of Public Welfare's licensing inspection on March 1, 2012 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 black ink, appearing to be 'R' followed by a horizontal line.

Ronald Melusky  
Director

Enclosures  
License  
Violation Report

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
INSPECTION DATES (Include all dates of the inspection) 03/01/2012		REGIONAL REPRESENTATIVE Michele Moskalczyk, Leslie Patton	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Lisa A. Howard, Director of Personal Care</i>			
SIGNATURE OF LEGAL ENTITY <i>Lisa A. Howard RN</i>	DATE <i>3/13/12</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE <i>3/21/12</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
18 A home shall comply with applicable Federal, State and local laws, ordinances and regulations.	The home is in violation of the Clean in Door Air Act. None of the entrances leading into the facility communicates to residents, staff or visitors if the facility allows smoking in the designated areas or if the facility is a smoke-free environment. It was verified by three staff persons (A-C) that residents are allowed to smoke in their apartments if they choose.	<i>3/13/12</i> + <i>*ONGOING</i>	Attached is a copy of the Cathedral Village Smoking Regulations (No-Smoking) Policy for all Personal Care (PC) residents effective March 17, 2008. Staff misunderstood the smoking question during the apartment tour - residents residing in independent living units are permitted to smoke in their apartments; residents in PC are not permitted to do so. Smoking is permitted in designated areas. (See attachment #1).  <i>* - The administrator will assure that all entrances leading into the facility are clearly marked that smoking is allowed in designated areas only. - The administrator to assure ongoing compliance with this regulation.</i>	<i>Steps have been taken to correct violation; full compliance to not verifiable</i> Date <i>[Signature]</i> Initials (DPW)

**RECEIVED**  
MAR 14 2012  
SCRANTON FIELD OFFICE  
Adult Residential Licensing

*M. Moskalczyk*

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
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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>George Howard JR</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE 3/21/12

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
			<i>- cont. from previous page.</i>	

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
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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>Ongoing Howard RW</i>	DATE <i>3/13/12</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE <i>3/21/12</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
25c13 (13) Written information on the resident's rights and complaint procedures as specified in § 2600.41 (relating to notification of rights and complaint procedures).	Resident contracts do not address the complaint procedure as specified by regulation 41.	<i>3/13/12</i> <i>↓</i> <i>Ongoing</i>	Facility failed to address complaint procedure in their PC contract.  Attached is a copy of the contract where #14.5 addresses the complaint procedure. Also included is the complaint procedure which is included in the packet of information presented to PC resident at the time of contract signing. (See attachment #2 and #3).  * The administrator/Deputy will monitor resident contracts for content and assure ongoing compliance. <i>M. Moskalczyk</i>	Steps have been taken to correct violation; full compliance is not verifiable <del>3/21/12</del> <del>3/21/12</del> <del>3/21/12</del> <del>3/21/12</del> <del>3/21/12</del> Initials (DPW)

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
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25c8 (8) The home's rules related to home services, including whether the home permits smoking.	As identified in the resident home rules section of their personal care home contracts, residents are not allowed to smoke in their apartments. However, it was verified by three staff persons, that residents may smoke in their apartments if they choose.	3/13/12 + * Ongoing	Attached is a copy of the Cathedral Village Smoking Regulations (No-Smoking) Policy for all Personal Care (PC) residents effective March 17, 2008. Staff misunderstood the smoking question during the apartment tour - residents residing in independent living units are permitted to smoke in their apartments; residents in PC are not permitted to do so. Smoking is permitted in designated areas. (See attachment #1).  * The administrator / Designer will assure that the home's rules indicate/documentate exact designated smoking areas. The administrator / Designer will audit all resident records to verify content + ongoing compliance.	Steps have been taken to correct violation; full compliance is not verifiable <del>MM</del> <del>MM</del> <del>MM</del> Date Initials (DPW)

*M. Moskalczyk*

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
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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>Philip G. Howard RN</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE 3/21/12

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
64c An administrator shall have at least 24 hours of annual training relating to the job duties. The Department-approved administrator training course specified in subsection (a) fulfills the annual training requirement for the first year.	Staff person C, who is the home's administrator, is short 4.7 hours of the required 24 hours for the administrator requirement for the training year 2011. Staff person D, who is the home's assistant administrator, is short 19.6 hours of the 24 hours of required training for the training year 2011.  Repeated Violations: 02/02/2011	3/13/12 2 * ongoing	Regulation 64 requires 24 hours of annual training for Administrator. Staff person D is an Assistant Administrator and doesn't fall under Administrator's requirement. PC Administrator fulfilled the 24 hour training requirement. (See attachment #4).  The home has 1 administrator, staff person C. The administrator will assure that at least 24 hr of annual training is completed. The administrator will assure that annual training is Department-approved and available for review upon request by the department. M. Moskalczyk	<del>DATE COMPLIANCE VERIFIED BY</del> Steps have been taken to correct violation; full compliance is not verifiable Initials (Date)

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SIGNATURE OF LEGAL ENTITY <i>Qing G. Howard PAW</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE 3/21/12

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
65g Direct care staff persons, ancillary staff persons, substitute personnel and regularly-scheduled volunteers shall be trained annually in the following areas: (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert. (2) Emergency preparedness procedures and recognition and response to crises and emergency situations. (3) Resident rights (under these	Staff person E (hired 7/4/05) did not receive training regarding fire safety, emergency preparedness plan, and falls and accident prevention for the training year of 2011.  Repeated Violations: 02/02/2011	3/13/12 + * ongoing	Staff person hired 7/4/05 did receive annual inservicing training pertaining to fire safety, emergency preparedness, falls and accident prevention for training year 2011. (See inservicing sheets verifying attendance attachment #5).  * The administrator will assure that all Staff has the required annual training. The administrator will assure that the required documentation is available for review by the department. <i>M. Moskalczyk</i>	Steps have been taken to correct violation; full compliance is not verifiable Date <i>3/21/12</i> Initials (DPW) <i>MM</i>

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
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SIGNATURE OF LEGAL ENTITY <i>Frank Q. Howard RW</i>	DATE <i>3/13/12</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE <i>3/21/12</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
regulations). (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101—10225.5102). (5) Falls and accident prevention. (6) New population groups that are being served at the home that were not previously served, if applicable.			<i>- Cont. from previous page.</i>	

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PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

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SIGNATURE OF LEGAL ENTITY <i>Quinn G. Howard RW</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE 3/21/12

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84 Heat sources, such as steam and hot heating pipes, water pipes, fixed space heaters, hot water heaters, and radiators, exceeding 120°F that are accessible to the resident, shall be equipped with protective guards or insulation to prevent the resident from coming in contact with the heat source.	All current personal care home residents' apartments have a surface wall mounted heater. The temperature of the heater in resident B302 measured 125 degrees. The heater located in the hallway accessible to residents, located by the door identified as S-491, measured 158.7 degrees. None of the wall heaters located throughout the campus has a protective guard to prevent residents from coming in contact with the heat source.	3/9/12	The existing surface mounted wall heaters in all of the units and throughout the commons areas exceeded 120° F. Electrical service to the surface wall mounted heaters has been <u>permanently disconnected in the PC units and common areas which PC residents have access to</u> throughout the community. We are in the process of trying to locate a supplemental heat source to replace all wall units that will not exceed 120°F. Director of Plant Services. Corrected on 3/9/12.	<p style="text-align: right;">Steps have been taken to correct violation; full compliance is not verifiable</p> <p style="text-align: center;"><i>MM</i> Date _____ Initials (DPW)</p>

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
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SIGNATURE OF LEGAL ENTITY <i>Quincy Howard RN</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE 3/21/12

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91 Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control center, municipal emergency management agency and personal care home complaint hotline shall be posted on or by each telephone with an outside line.	The emergency telephone numbers were not posted by any of the telephones in the resident apartments or on any of the phones in the common areas where personal care home resident meet and or visit. All phones are labeled with a tag that states: "Phone - Dial 0 for Emergency".	3/16/12	To enable resident quick access to emergency telephone numbers we will add additional emergency numbers to ones already in existence. A laminated card with required emergency numbers will be placed at all phones in PC apartments and common areas. <u>PC Assistant Administrator will monitor for compliance.</u> New laminated placards will be in place by 3/16/12.	<i>mm</i> 3/21/12

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

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SIGNATURE OF LEGAL ENTITY <i>Frank Howard RN</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>m. moskalczyk</i>	DATE 3/21/12

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
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 home has two first aid kits located at the nurse's desk which were missing the following items: <ul style="list-style-type: none"> <li>The large black and green bag: tweezers, scissors, a thermometer, eye protectors and a breathing shield.</li> <li>The small black bag: tweezers, scissors, thermometer, tape and band-aids.</li> </ul>	3/13/12	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 missing items have been replaced as of 3/6/12 and will be <u>maintained and monitored by PC Assistant Administrator.</u>	<i>MM</i> 3/21/12

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

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SIGNATURE OF LEGAL ENTITY <i>Spina Howard RN</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE 3/21/12

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
106 If a home operates a swimming area, the following requirements apply: (1) Swimming areas shall be operated in accordance with applicable laws and regulations. (2) Written policy and procedures to protect the health, safety and well-being of the residents shall be developed and implemented.	The home currently operates a swimming pool; however, the home does not have written policies and procedures to protect the health, safety and well-being of the personal care home residents who may utilize this pool.	3/13/12	The policy pertaining to pool safety has been in effect since 7/31/08 and is included in the PC Policy Manual as well as posted on the door leading to the pool. (See policy pertaining to swimming pool attachment #6).	<i>MM</i> 3/21/12

VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
INSPECTION DATES (Include all dates of the inspection) 03/01/2012		REGIONAL REPRESENTATIVE Michelle Moskalczyk, Leslie Padon	
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>James Howard, Jr.</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE 4/6/12

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
121A Stairways, hallways, doorways, passageways and egress routes from rooms and from the building shall be unlocked and unobstructed.	Located in the individual resident apartments which are located above ground level, all apartments have sliding glass doors that lead to an enclosed balcony. None of the exits leading to the enclosed balconies have signs indicating "this is not an exit". Resident cannot move beyond these balconies to exit the building in the event of an emergency.	4/10/12	The enclosed balconies do not have signs indicating that it is not an exit. A "this is not an exit" sign has been placed above all balcony doors. CNA/Housekeeping will assure compliance. All signs will be installed by 4/10/12.	<p align="center">Steps have been taken to correct violation; full compliance is verifiable</p> <p align="center">Date: <i>4/10/12</i> Initials (DPW): <i>MP</i></p>

VIOLATION REPORT  
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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>Quinn G. Howard RN</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE 3/21/12

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
132a An unannounced fire drill shall be held at least once a month.	Based upon staff interviews, it was concluded that monthly fire drills are announced. Staff is told in advance that they will need to assist in the evacuation of residents during a fire drill that is scheduled to be conducted during their shift. In addition, residents are also given advanced notice that a fire drill is schedule for that day and that their participation is required.  Repeated Violations: 02/02/2011	3/13/12	As per regulation 2600.132(a) an unannounced fire drill will be held monthly. Monthly fire drills were announced to staff and residents. <u>Effective immediately all fire drills will be conducted without advance notice.</u> Director of Plant Services is responsible for compliance. The unannounced fire drills will be conducted starting with the next monthly drill. PC Administrator will monitor Director of Plant Services' compliance with regulation. (See attachment #8).	<div style="border: 1px solid black; padding: 2px; transform: rotate(-90deg); font-size: 8px;">                     Steps have been taken to correct violation; full compliance is not verifiable                      Date: _____                      Initials (DPW): _____                 </div>

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

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SIGNATURE OF LEGAL ENTITY <i>Quinn Howard RN</i>	DATE <i>2/13/12</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE <i>3/21/12</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																																																																	
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**VIOLATION REPORT**  
**PERSONAL CARE HOMES - 55 Pa. Code Chapter 2600**

Page 15 of 31

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19123		CURRENT LICENSE NUMBER 129530	
INSPECTION DATES (include all dates of the inspection) 03/01/2012		REGIONAL REPRESENTATIVE Michelle Moskalczyk, Leslie Patton	
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>OPMAG, Howard J. G.W.</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE 4/6/12

REGULATION	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																																													
1324 55 Pa Code §2600 Residents shall be able to evacuate the entire building to a public thoroughfare or to a fire safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.	The home's monthly fire drill record indicates that the evacuation time for fire drills often exceeds 2 minutes and 30 seconds. The home does not have a current letter dated within the past year from a fire safety expert granting additional time for evacuation based upon the safety features and construction of the home. The most recent letter which granted an evacuation time of 3 minutes is dated 2/22/10. The home's fire drill record indicated the following evacuation times: <table border="1"> <thead> <tr> <th>Building</th> <th>Date</th> <th>Evacuation Time</th> </tr> </thead> <tbody> <tr><td>A</td><td>10/18/11</td><td>3min 30sec</td></tr> <tr><td>A</td><td>12/20/11</td><td>3min 10sec</td></tr> <tr><td>A</td><td>10/18/11</td><td>3min 30sec</td></tr> <tr><td>A</td><td>12/20/11</td><td>3min 10sec</td></tr> <tr><td>A</td><td>10/18/11</td><td>3min 55sec</td></tr> <tr><td>A</td><td>1/18/12</td><td>3min 25sec</td></tr> <tr><td>A</td><td>1/12/12</td><td>3min 25sec</td></tr> <tr><td>A</td><td>10/18/11</td><td>3min</td></tr> <tr><td>A</td><td>11/10/11</td><td>3min 10sec</td></tr> <tr><td>A</td><td>2/29/12</td><td>3min</td></tr> <tr><td>A</td><td>10/18/11</td><td>3min 45sec</td></tr> <tr><td>A</td><td>11/18/11</td><td>3min 35sec</td></tr> <tr><td>A</td><td>12/20/11</td><td>3min 30sec</td></tr> <tr><td>A</td><td>2/23/12</td><td>3min 25sec</td></tr> </tbody> </table>	Building	Date	Evacuation Time	A	10/18/11	3min 30sec	A	12/20/11	3min 10sec	A	10/18/11	3min 30sec	A	12/20/11	3min 10sec	A	10/18/11	3min 55sec	A	1/18/12	3min 25sec	A	1/12/12	3min 25sec	A	10/18/11	3min	A	11/10/11	3min 10sec	A	2/29/12	3min	A	10/18/11	3min 45sec	A	11/18/11	3min 35sec	A	12/20/11	3min 30sec	A	2/23/12	3min 25sec	3/6/12	Community's monthly evacuation time for Personal Care residents exceeds 5 minutes in all cases. The facility has a letter dated 10/27/11 from our fire safety expert that he monitored a fire safety exercise and stated that we are in full compliance with our fire evacuation procedures. The facility has always maintained compliance regarding fire safety evacuation drills. (See attached letter dated 10/27/11 attachment #9). In addition the facility has an updated letter allowing 2 additional minutes. (See attached letter dated 3/6/12 attachment #10). We have a current letter which allows for 10 minutes of evaluation time. (See attached letters dated 10/27/11 and 3/6/12 attachment #10).	<i>mm</i> 4/6/12
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VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa. Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19139		CURRENT LICENSE NUMBER 129530	
INSPECTION DATES (include all dates of the inspection) 02/01/2012		REGIONAL REPRESENTATIVE Michelle Moskalezyk, Leslie Patton	
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>James Howard JR</i>	DATE <i>3/13/12</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalezyk</i>	DATE <i>4/6/12</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
			<i>CONT. FROM PREVIOUS PAGE</i>	
	3H 10/18/11 3min 20sec 3H 11/18/11 3min 45sec 3H 12/20/11 3min 45sec 3H 1/16/12 3min 16sec 3H 2/23/12 2min 55sec 3H 10/18/11 3min 10sec 3H 11/18/11 3min 3H 12/20/11 3min 30sec 3H 2/23/12 3min 15sec 3L 2/23/12 3min 15sec		Director of Plant Services will be responsible for obtaining annual letter from CV fire safety expert and will assure compliance.  <i>- Previous page</i>	

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
INSPECTION DATES (Include all dates of the inspection) 03/01/2012		REGIONAL REPRESENTATIVE Michele Moskalczyk, Leslie Patton	
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>Thomas Howard RV</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE 4/6/12

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) <i>(cont. from previous page)</i>																																																																	
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VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
INSPECTION DATES (Include all dates of the inspection) 03/01/2012		REGIONAL REPRESENTATIVE Michele Moskalczyk, Leslie Patton	
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>Quinn G. Howard RN</i>	DATE  3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION  <i>M. Moskalczyk</i>	DATE  3/21/12

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
132d Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.	Residents are evacuated from their rooms, which lead directly to the outside of the building, during monthly fire drills. Residents are then brought inside of the building to the lobby which is the home's designated fire-safe area at which time the staff conduct a count of the residents to ensure all residents have been evacuated safely. The home's lobby has not been designated in writing by a fire-safety expert as an approved fire-safe area and therefore is not an appropriate place for residents to congregate during monthly fire drills.  Repeated Violations: 02/02/2011		<del>As per our fire safety expert, residents have been evacuated from the building in alarm and they have reached a fire safe area. The commons area (Lobby) was never designated as our fire-safe area, it was designated as a meeting place for residents to gather and be accounted for. (See letter dated 10/27/11 attachment #9 and Fire Drill Policy attachment #8).</del>  <i>w/d violation M. Moskalczyk</i>	

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
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SIGNATURE OF LEGAL ENTITY <i>Quincy Howard RN</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE 3/21/12

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NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
INSPECTION DATES (Include all dates of the inspection) 03/01/2012		REGIONAL REPRESENTATIVE Michele Moskalczyk, Leslie Patton	
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>Opina Howard BV</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE 3/21/12

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																																																																	
132e A fire drill shall be held during sleeping hours once every 6 months.	<p>The home's monthly Fire drills are not being conducted during sleeping-hours at least once every 6 months. The home's fire drill records indicate the most recent sleeping hour fire drills for buildings "A"- "J" and "K" and "L" were conducted on 7/29/11 and 8/16/11.</p> <table style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <thead> <tr> <th style="text-align: left;"><u>Mont</u></th> <th style="text-align: left;"><u>Date</u></th> <th style="text-align: left;"><u>Time</u></th> <th style="text-align: left;"><u>Evac. Time</u></th> <th style="text-align: left;"><u>FSE</u></th> </tr> </thead> <tbody> <tr><td>Jan</td><td></td><td></td><td></td><td>No</td></tr> <tr><td>Feb</td><td></td><td></td><td></td><td>No</td></tr> <tr><td>Mar</td><td></td><td></td><td></td><td>No</td></tr> <tr><td>Apr</td><td></td><td></td><td></td><td>No</td></tr> <tr><td>May</td><td></td><td></td><td></td><td>No</td></tr> <tr><td>Jun</td><td></td><td></td><td></td><td>No</td></tr> <tr><td>Jul</td><td></td><td></td><td></td><td>No</td></tr> <tr><td>Aug</td><td></td><td></td><td></td><td>No</td></tr> <tr><td>Sep</td><td></td><td></td><td></td><td>No</td></tr> <tr><td>Oct</td><td></td><td></td><td></td><td>No</td></tr> <tr><td>Nov</td><td></td><td></td><td></td><td>No</td></tr> <tr><td>Dec</td><td></td><td></td><td></td><td>No</td></tr> </tbody> </table>	<u>Mont</u>	<u>Date</u>	<u>Time</u>	<u>Evac. Time</u>	<u>FSE</u>	Jan				No	Feb				No	Mar				No	Apr				No	May				No	Jun				No	Jul				No	Aug				No	Sep				No	Oct				No	Nov				No	Dec				No	3/13/12	The Director of Plant Services developed the 2011 schedule and did not schedule two drills six months apart. Two of the twelve monthly fire drills during sleep hours were conducted seven months apart. Going forward fire drills will be done six months apart. PC Administrator will monitor compliance.	<p style="text-align: center;"><b>Steps have been taken to correct violation; full compliance is not verifiable</b></p> <p style="text-align: center;">Date <i>MM/DD/YY</i> Initials (DPW) <i>MM</i></p>
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**VIOLATION REPORT**  
**PERSONAL CARE HOMES - 55 Pa. Code Chapter 2600**

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E. CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129350	
INSPECTION DATES (include all dates of the inspection) 03/01/2012		REGIONAL REPRESENTATIVE Michele Moskaczuk, Leslie Parron	
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>[Signature]</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 4/6/12

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
133a1 If the home serves nine or more residents, signs bearing the word "EXIT" in plain legible letters shall be placed at all exits.	Located in the individual resident apartments on the ground floor level throughout the campus, all apartments have sliding glass doors that lead to the outside of the building. None of these exits are identified with an exit sign as required.	4/10/12	Exit signs have been placed above all sliding glass/patio doors. CNA/Housekeeping will assure compliance. All signs will be installed by 4/10/12.	<p align="center">Steps have been taken to correct violation; full compliance is not verified.</p> <p align="center">Date: <i>[Signature]</i>  Initials (DPM)</p>

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
INSPECTION DATES (Include all dates of the inspection) 03/01/2012		REGIONAL REPRESENTATIVE Michele Moskalczyk, Leslie Patton	
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SIGNATURE OF LEGAL ENTITY <i>Qing. Howard RV</i>	DATE <i>3/13/12</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE <i>3/21/12</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
144b The home rules shall specify whether the home is designated as smoking or non-smoking.	Identified in the resident home rules section of their personal care home contracts, residents are not allowed to smoke in their apartments. The home rules do not identify the designated smoking areas located throughout the campus and residents may smoke in their apartments if they choose. This was verified by three separate staff interviews.	<i>3/13/12</i> + <i>*Ongoing</i>	Violation states the home rules should state whether the home is designated as smoking or non-smoking. Facility's Home Rule #8 states all smoking by residents, employees and visitors will be done in designated smoking areas. No smoking will be allowed in residents' apartments. Policy has been in effect since March 17, 2008 and is in the PC Policy Manual. (See attached copy of Home Rules attachment #11 and Smoking Policy attachment #1).  <i>* The administrator will monitor and assure compliance.</i> <i>M. Moskalczyk</i>	<div style="writing-mode: vertical-rl; transform: rotate(180deg);"> <i>Steps have been taken to correct violation; full compliance is not verifiable</i> </div> <div style="writing-mode: vertical-rl; transform: rotate(180deg);"> <i>DATE</i> <i>INITIALS (DPW)</i> </div>

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

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NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E. CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129330	
INSPECTION DATES (include all dates of the inspection) 03/01/2012		REGIONAL REPRESENTATIVE Michele Moskalczyk, Leticia Patton	
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>[Signature]</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 4/6/12

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
144c A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures. The written fire safety policy and procedures shall include proper safeguards inside and outside of the home to prevent fire hazards involved in smoking, including extinguishing procedures.	Located in the exterior second floor staff smoking area was a large garbage can filled ¾ to the top with trash and cigarette butts which create a potential combustible, flammable hazard.	4/11/12 + ONGOING	Cigarette butts were discovered in the trash can that was ¾ full of trash. Employees are to smoke in designated areas. The designated smoking area on the second floor exterior walkway has non-combustible ashtrays, a trash can and a fire extinguisher located in this area. The procedure for discarding cigarettes in the trash can is as follows. Before the housekeeping staff empties the cigarette butts from ashtrays, they spray the cigarette butts with water. The contents of the trash receptacle are discarded into a larger compactor at our loading dock area. (See Procedure attachment #12).  * Trash can was removed and cleaned immediately on day of inspection. Housekeeping staff will be inserviced on policy and procedure. Expected date of completion will be 4/11/12. Director of Housekeeping will assure compliance.	Steps have been taken to correct violation; full compliance is not verifiable Date Initials [Signature]

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
INSPECTION DATES (Include all dates of the inspection) 03/01/2012		REGIONAL REPRESENTATIVE Michele Moskalczyk, Leslie Patton	
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>Frank Howard RP</i>	DATE <i>3/13/12</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE <i>3-21-12</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
144d Smoking outside of the smoking room is prohibited.	It was verified by three staff persons (A-C) that residents are allowed to smoke in their apartments if they choose. Resident apartments are not designated smoking areas.	<i>3/13/12</i>  <i>Ongoing</i>	Staff A-C did not answer the question accurately due to a misunderstanding of the question. Residents residing in the independent living units are permitted to smoke in their apartments; PC residents are not. (Please refer to policy implemented on 3/17/08 attachment #1 and Home Rules Policy attachment # 11).  <i>The administrator/designee will assure PC residents do not smoke in their rooms.</i> <i>Staff + Residents to be retrained on the homes Smoking policy and designated smoking areas.</i> <i>M. Moskalczyk</i>	<i>Steps have been taken to correct violation; full compliance is not verifiable</i> <i>3/21/12</i> <i>MM</i> <i>Initials (DPW)</i>

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
INSPECTION DATES (Include all dates of the inspection) 03/01/2012		REGIONAL REPRESENTATIVE Michele Moskalczyk, Leslie Patton	
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>Timothy Howard</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE 3/21/12

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
183a1 Prescription medications, OTC medications and CAM shall be kept in their original labeled containers and may not be removed more than 2 hours in advance of the scheduled administration.	Psyllium fiber belonging to resident #1 had been removed from its original container by staff and was placed in two small pharmacy bottles labeled "2 teaspoons" so that the medication would already be pre-measured before administration and would be easier to transport than the original container which is much larger.	3/13/12	Prescription medications and OTC medications shall be kept in their original labeled containers and may not be removed more than 2 hours in advance of the scheduled administration. Prescription medications and OTC medications must be kept in original container to avoid any possibility of a medication error. Medication was removed from original container by staff and placed in a smaller bottle for easier transport. Staff has been inserviced to never remove prescriptions and OTC medication from their original containers. The PC Administrator will monitor medication distribution. (See inservice record attachment #13).	<p align="center">Steps have been taken to correct violation; full compliance is not verifiable</p> <p>Date _____ Initials (DPW) _____</p>

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
INSPECTION DATES (Include all dates of the inspection) 03/01/2012		REGIONAL REPRESENTATIVE Michele Moskalczyk, Leslie Patton	
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>Orlando Howard</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE 4/6/12

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
190a A staff person who has successfully completed a Department-approved medication administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.	<p>The Initial Annual Practicum in the record of staff person F (dated 5/3/11) was not completed in its entirety. The staff person only completed 1 of 2 required Medication Administration Record (MAR) reviews and is therefore not properly trained to administer medication.</p> <p>The Initial Annual Practicum in the record of staff person G (dated 10/16/11) was not completed in its entirety. The staff person only completed 1 of 2 required MAR reviews and only 1 of 3 medication administration observations and is therefore not properly trained to administer medications.</p> <p>The record of staff persons H-Q contained a Student Certification Form indicating the staff persons either completed an Initial Annual Practicum and/or an Annual Practicum during 2011. Staff person C, who is the administrator and the Train-the-Trainer, did not complete the training documentation and therefore there is no method of verification to determine if the staff persons received medication administration training during 2011 and if the training was done correctly. As a result of the lacking documentation, the above mentioned staff persons are not permitted to</p>	<p>4/30/12 + ONGOING</p>	<p>All staff personnel will be trained in proper procedures to safely and correctly administer medication. The annual practicum for medication administration was not completed in its entirety. The PC Administrator will be attending the DPW approved "Train the Trainer" course on 3/20-21/12. After this course is passed the staff will be re-inserviced and the annual practicum will be completed in its entirety. The practicum will be completed every two years in its entirety for all staff. PC Administrator will monitor compliance. Expected completion date is 4/30/12.</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p><i>MAR</i> Date 3/29/12 Initials (DPW)</p>

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER I29530	
INSPECTION DATES (Include all dates of the inspection) 03/01/2012		REGIONAL REPRESENTATIVE Michele Moskalczyk, Leslie Patton	
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>Timothy Howard RW</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>m. moskalczyk</i>	DATE 4/6/12

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
	administer medication.  Repeated Violations: 02/02/2011		<i>- previous page</i>	

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
INSPECTION DATES (include all dates of the inspection) 03/01/2012		REGIONAL REPRESENTATIVE Michele Moskalczyk, Leslie Patton	
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>Quincy Howard RN</i>	DATE 3/13/12	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE 3/21/12

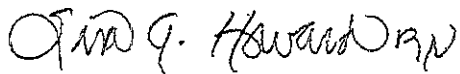
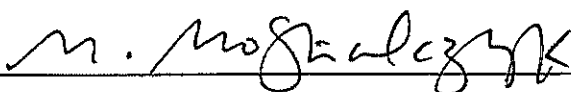
REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
187a A medication record shall be kept to include the following for 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	<p>Staff did not sign or initial the Medication Administration Record (MAR) of resident #2 to indicate Pepcid 25mg was administered at 9:00am on 12/29/12.</p> <p>Staff did not sign or initial the MAR of resident #3 to indicate Acetaminophen 500mg was administered at 8:00pm on 2/29/12.</p> <p>Staff did not sign or initial the MAR of resident #4 to indicate Calcium 800mg and Lipitor 80mg was administered at 9:00pm on 2/29/12 and that Nortriptylene HCL 25mg was administered at 8:00pm on 2/29/12.</p>	3/13/12	A medication record will be kept on every PC resident to ensure all medications are administered as prescribed. Staff did not initial the Medication Administration Record for each medication given. Staff was re-inserviced on 3/6-7/12. PC Administrator will monitor compliance. (See attachment #14).	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p><i>[Signature]</i> Initials (DPW) Date</p>



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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
INSPECTION DATES (include all dates of the inspection) 03/01/2012		REGIONAL REPRESENTATIVE Michele Moskalczyk, Leslie Patton	
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>Quinn G. Howard RN</i>	DATE <i>3/13/12</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE <i>3/21/12</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
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.			<i>- Cont. from previous page.</i>	

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
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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
<p>187c</p> <p>If a resident refuses to take a prescribed medication, the refusal shall be documented in the resident's record and on the medication record. The refusal shall be reported to the prescriber within 24 hours, unless otherwise instructed by the prescriber. Subsequent refusals to take a prescribed medication shall be reported as required by the prescriber.</p>	<p>The prescribing physician was not notified when resident #5 refused Amlactin 12% at 7:00pm on 2/25/12, 2/26/12, 2/28/12 and 2/29/12.</p> <p>The prescribing physician was not notified when resident #6 refused Acetaminophen 325mg at 8:00pm on 2/27/12 and 2/29/12.</p>	<p>3/13/12</p>	<p>If a resident refuses to take a prescribed medication, the refusal should be documented in the resident's record on the medication record. The refusal shall be reported to the prescriber within 24 hours, unless otherwise instructed by the prescriber. The prescribing physician is not being notified when a resident refuses a medication. Staff was inserviced on 3/6/12 and 3/8/12 as to the proper procedure when a medication is refused. PC Administrator will monitor compliance. (See attachment # 15).</p>	<p style="writing-mode: vertical-rl; transform: rotate(180deg);">                     Steps have been taken to correct violation; full compliance is not verifiable                      Date                       Initials (DPW)  </p>	

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

NAME AND ADDRESS OF PERSONAL CARE HOME CATHEDRAL VILLAGE, 600 E CATHEDRAL ROAD PHILADELPHIA, PA 19128		CURRENT LICENSE NUMBER 129530	
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SIGNATURE OF LEGAL ENTITY <i>Q. Howard RN</i>	DATE <i>3/13/12</i>	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>M. Moskalczyk</i>	DATE <i>3/21/12</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
251d Separate resident records shall be kept on the premises where the resident lives.	Resident's medical evaluations, pre-admission assessments, personal care home assessments and support plans are all kept in one large binder. Resident's forms are separated by section tabs. Separate records shall be kept for all residents.	<i>3/13/12</i>	Resident's medical evaluations, pre-admission assessments, PC home assessments and support plans are all kept in one large binder. <u>Separate resident records will be kept for each PC resident. All PC records have been consolidated into one resident medical chart.</u>  Once completed, the <u>PC Assistant Administrator</u> will be responsible for compliance.	<p style="writing-mode: vertical-rl; transform: rotate(180deg);">Steps have been taken to correct violation; full compliance is not verifiable</p> <p style="writing-mode: vertical-rl; transform: rotate(180deg);">Date <i>3/21/12</i> Initials (DPW) <i>LL</i></p>
<p style="font-size: 2em; font-weight: bold; margin: 0;">RECEIVED</p> <p style="margin: 5px 0 0 0;">MAR 14 2012</p> <p style="font-weight: bold; margin: 0;">SCRANTON FIELD OFFICE Adult Residential Licensing</p>				