

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to RICHARDSON GROUP, SENIOR CITIZENS LIVING QUARTERS, INC.

To operate RICHARDSON GROUP, SENIOR CITIZENS LIVING QUARTERS

Located at 1750 BRIDGE STREET, PHILADELPHIA, PA 19124

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 4
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 August 27, 2012 until August 27, 2013,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 100510

Robert E. Robinson

ISSUING OFFICER

R. C. King

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



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

AUG 10 2012

Ms. Diane S. Richardson, Administrator/Managing Director
Richardson Group Senior Citizens Living Quarter, Inc.
7942 Gilbert Street
Philadelphia, Pennsylvania 19150

RE: Richardson Group Senior Citizens Living Quarter
1750 Bridge Street
Philadelphia, Pennsylvania 19124

Dear Ms. Richardson:

As a result of the Department of Public Welfare's licensing inspection on July 6, 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 read "R. Melusky".

Ronald Melusky
Director

Enclosures
License
Violation Report

Violation Report: 10051 - 07/06/2012 - Scharpf, Amy
PCH Name: RICHARDSON GROUP SENIOR CITIZENS LIVING QUARTERS

1. REGULATION 55 Pa.Code §2600
2800.66(a) - A staff training plan shall be developed annually.

2a. DESCRIPTION OF VIOLATION
The home does not have a staff training plan for 2012.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Administrator has developed a staff training plan for 2012 and was introduced into effect on 7-13-12. A computer generated notification of a monthly staff training meeting has been put in place to ensure meetings are to take place and training.
"See Attached Documentation For Corrective Action."

Repeat Violation: Yes Date(s) of Previous Violation(s): 05/24/2011

Signature of Legal Entity Representative (Required on EVERY Page) *Meredith Richardson*
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Meredith Richardson* Date *7-25-12*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 7/30/12 (Date)
The above plan of correction was approved by CRM (Initials)
Plan of correction implementation status as of 7/30/12 (Date)
 Fully Implemented
 Partially Implemented - Adequate Progress
 Partially Implemented - Inadequate Progress
 Not Implemented

Violation Report: 10051 - 07/06/2012 - Scharpf, Amy
 PCH Name: RICHARDSON GROUP SENIOR CITIZENS LIVING QUARTERS

1. REGULATION 55 Pa.Code §2600
 2600.101(j)(7) - Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on at bedside.

2a. DESCRIPTION OF VIOLATION
 The bed belonging to Resident #1 does not have a source of light that can be turned on/off from bedside.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Resident #1 lamp has had light source by bedside replaced and operable. Bedside light source will be checked daily at room cleaning in all rooms to detect and replace any light source that does not operate properly.

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page) *Marie S. Richardson*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Marie S. Richardson* Date *7/5/12*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>7/30/12</u> (Date)	Plan of correction implementation status as of <u>7/30/12</u> (Date)
The above plan of correction was approved by <u>ORNL</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 10051 - 07/06/2012 - Scharpf, Amy
 PCH Name: RICHARDSON GROUP SENIOR CITIZENS LIVING QUARTERS

1. REGULATION 55 Pa.Code §2600
 2600.102(d)(2) - Bathtubs and showers must have slip-resistant surfaces.

2a. DESCRIPTION OF VIOLATION
 The bathtub/shower in the second floor bathroom does not have a slip-resistant surface.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

*Administrators has installed wall showers and tubs surfaces - slip resistant materials. In future administrators will make sure staff checks regularly for slip resistant materials in showers and tubs.
 " See Photos Attached "*

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page) *Charles Richardson*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Charles Richardson* Date *7-25-12*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of *7/20/12* (Date)

Plan of correction implementation status as of *7/20/12* (Date)

The above plan of correction was approved by *CRM* (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 10051 - 07/06/2012 - Scharpf, Amy
 PCH Name: RICHARDSON GROUP SENIOR CITIZENS LIVING QUARTERS

1. REGULATION 55 Pa.Code §2600
 2600.107(a) - The administrator shall have a copy and be familiar with the emergency preparedness plan for the municipality in which the home is located.

2a. DESCRIPTION OF VIOLATION
 The administrator does not have the emergency preparedness plan for the local municipality.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Administrator has a copy of City of Philadelphia Emergency Preparedness Plan for the Homes Municipality in place and have posted the plan. Administrator will be sure plan is placed in all locations and all staff regularly briefed in staff meetings

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page) *Michael Richardson*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Michael Richardson* Date *7-25-12*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 7/30/12
 (Date)

The above plan of correction was approved by OCM
 (Initials)

Plan of correction implementation status as of 7/30/12
 (Date)

Fully Implemented
 Partially Implemented - Adequate Progress
 Partially Implemented - Inadequate Progress
 Not Implemented

Violation Report: 10051 - 07/06/2012 - Scharpf, Amy
PCH Name: RICHARDSON GROUP SENIOR CITIZENS LIVING QUARTERS

1. REGULATION 55 Pa.Code §2600
2600.125(a) - Combustible and flammable materials may not be located near heat sources or hot water heaters.

2a. DESCRIPTION OF VIOLATION
-The water heater had an open cardboard box within proximity close enough to be ignited.
-The furnace in the basement had 2 vacuums and a rolled up rubber mat within proximity close enough to be ignited.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.
Administrator has had all flammable material, rubber mats and vacuum cleaners removed from proximity of furnace and water heater. Administrator will have staff regularly check area around furnace and water heater for ignitable materials and keep area clear.

Repeat Violation: Yes Date(s) of Previous Violation(s): 05/24/2011

Signature of Legal Entity Representative (Required on EVERY Page) *Maries S. Richardson*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Maries S. Richardson* Date *7-25-12*

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 Fully Implemented
 Partially Implemented - Adequate Progress
 Partially Implemented - Inadequate Progress
 Not Implemented
The above plan of correction was approved by CRM (Initials)

Violation Report: 10051 - 07/06/2012 - Scharpf, Amy
PCH Name: RICHARDSON GROUP SENIOR CITIZENS LIVING QUARTERS

1. REGULATION 55 Pa.Code §2600

2600.187(b) - The information in § 2600.187(a)(13) and § 2600.187(a)(14) shall be recorded at the time the medication is administered.

2a. DESCRIPTION OF VIOLATION

On 6/5/12, at 8:00am, Resident #2 Fluticasome Propionate 50mc was administered. The medication administration record was not initialed at the time of administration.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Administrator has reviewed all MAR's
Administration for Med Tech documentation.
Administrator will have MAR and
Administration monitored daily for
Med administration and documentation
compliance.

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page) *Wendy S. Richardson*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Wendy S. Richardson* Date *7-25-12*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 7/30/12
(Date)

The above plan of correction was approved by CRM
(Initials)

Plan of correction implementation status as of 7/30/12
(Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 10051 - 07/06/2012 - Scharpf, Amy
 PCH Name: RICHARDSON GROUP SENIOR CITIZENS LIVING QUARTERS

1. REGULATION 55 Pa.Code §2600
 2600.187(d) - The home shall follow the directions of the prescriber.

2a. DESCRIPTION OF VIOLATION

Resident #2 is prescribed Systane 4 times daily, the prescription label reads instill one drop in each eye every 2 hours. The home is administering to resident at 8:00am, 4:00pm and 8:00pm.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Resident #2 will receive according to prescription Systane 4 times daily at 8AM, 4pm, 8pm, when resident returns from his Day Program, 4PM and 8pm. Documentation has been corrected to reflect new changes in daily administration. Administration will in future make sure all med prescription administration times are followed as directed.

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page) *Mavis S. Richardson*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Mavis S. Richardson* Date *7-25-12*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 7/30/12
 (Date)

Plan of correction implementation status as of 7/30/12
 (Date)

The above plan of correction was approved by OM
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented