



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: February 28, 2014

Ms. Marina Hacking, Administrator
Philadelphia Presbytery Homes, Inc.
2000 Joshua Road
Lafayette Hill, Pennsylvania 19444

RE: Rosemont Presbyterian Village
404 Cheswick Place
Rosemont, Pennsylvania 19010
License # 176630

Dear Ms. Hacking:

As a result of the Department of Public Welfare's licensing inspection on July 2, 2013 and July 8, 2013 of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa. Code Ch. 2600 (relating to Personal Care homes) must be maintained.

Sincerely,

Chevon Miller
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

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

PCH Name: ROSEMONT PRESBYTERIAN VILLAGE		License Number: 17663
Address: 404 CHESWICK PLACE, ROSEMONT, PA 19010		County: Delaware
Administrator: Marina Hacking		Region: SOUTHEAST
Legal Entity Name: PHILADELPHIA PRESBYTERY HOMES INC		
Legal Entity Address: 2000 JOSHUA ROAD, LAFAYETTE HILL, PA 19444		
Certificate(s) of Occupancy		
Staffing Hours		
Resident Support:	Total Daily Staff: 80	Waking Staff: 60
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Complaint		
On-Site Inspections Dates and Department Representatives On-Site 07/01/2013: McHale, Christine		
Off-Site Inspection Dates and Inspectors, if Applicable 07/02/2013: McHale, Christine 07/08/2013: McHale, Christine		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 221 Number of Residents Served: 72 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 1 Number of Hospice Residents in past year: 5	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 72 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 8 Have a Physical Disability: 0	

Violation Report: 17663 - 07/01/2013 - McHale, Christine
 PCH Name: ROSEMONT PRESBYTERIAN VILLAGE

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

Resident #1 was sent to the hospital on 5/14/13 at approximately 2:00 pm. On 5/14/13 at 7:00 pm and 5/15/13 at 11:00 am the resident's medication administration record was initiated as being administered by the home's staff.

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.

Administering Staff were suspended pending investigation. Upon their return, they were provided re-education on recording medication administration at the time it is administered.

Nursing Staff were re-educated on 7/12/2013 regarding regulation 187, medication practices.

Resident Services Director/Designee will be auditing leave of absence records monthly for compliance. Results will be presented at the monthly quality management meeting and addressed as necessary.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page)




Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
Marina Hacking, Administrator	11/1/13

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

The above plan of correction is approved as of 11/4/13
 (Date)

Plan of correction implementation status as of 11/4/13
 (Date)

The above plan of correction was approved by 
 (Initials)

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