



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

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

Ms. Kawana Blake-Williams, President
Kaysim Housing Group, Inc.
5909-19 Wayne Avenue
Philadelphia, Pennsylvania 19144

RE: Kaysim Court Manor
License #109660

Dear Ms. Blake-Williams:

As a result of the Department of Public Welfare's licensing inspection on September 16, 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,

A handwritten signature in black ink that reads "Chevon Miller".

Chevon Miller
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

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

PCH Name: KAYSIM COURT MANOR		License Number: 10966
Address: 5909 19 WAYNE AVENUE, PHILADELPHIA, PA 19144		County: Philadelphia
Administrator: Kawana Blake-Williams		Region: SOUTHEAST
Legal Entity Name: KAYSIM HOUSING GROUP INC		
Legal Entity Address: 5909-19 WAYNE AVENUE, PHILADELPHIA, PA 19144		
Certificate(s) of Occupancy		
Staffing Hours		
Resident Support:	Total Daily Staff: 72	Waking Staff: 54
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 09/16/2013: Kazimer, Lauren; McHale, Christine		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 81	Number of Residents who:	
Number of Residents Served: 72	Receive Supplemental Security Income: 66	
Secured Dementia Care Unit in Home: No	Are 60 Years of Age or Older: 14	
Area:	Have Mental Illness: 68	
Secured Dementia Unit Capacity, if Applicable:	Have an Intellectual Disability: 3	
Number of Residents Served in Secured Dementia Care Unit, if applicable:	Have a Mobility Need: 0	
Number of Current Hospice Residents: 0	Have a Physical Disability: 0	
Number of Hospice Residents in past year: 0		

Violation Report: 10958-09/16/2013 - Kazimer, Lauren
PCH Name: KAYSIM COURT MANDR

1. REGULATION 55 Pa. Code §2603
2603.15(a) - The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 - 10225.707) and 6 Pa. Code Sections 15.21 - 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

2a. DESCRIPTION OF VIOLATION
On 8/31/2013, an allegation of sexual abuse was reported by resident #1 to staff. The home did not report the allegation to the local area agency on 10/3/13.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you are signing and dating any attached pages.)
Attaches 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.

On 10-17-13 I obtained a copy of the Department's current process for handling protective services investigations for adults with disabilities between the ages of 18 and 59 consistent with Act 70 of 2010. I have submitted questions for further understanding of correct reporting agencies and procedures relevant to Philadelphia County residents. As soon as I get clarification I will conduct training for my staff.

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

Signature of Legal Entity Representative (Required on EVERY Page) *Kawana Blake-Williams*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *KAWANA Blake-Williams* Date: *10-17-13*

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

The above plan of correction is approved as of 10/22/13 (Date) Plan of correction implementation status as of 10/22/13 (Date)

The above plan of correction was approved by *ORW* (Initials)
 Fully Implemented
 Partly Implemented - Adequate Progress
 Partly Implemented - Inadequate Progress
 Not Implemented

NO. 0963 P. 1

OCT. 17. 2013 . 2:18AM

(FAX)