



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JUN 16 2015

Ms. Sylvia Virgile, Personal Care Administrator
Evangelical Manor, Inc.
8401 Roosevelt Boulevard
Philadelphia, Pennsylvania 19152

RE: Wesley Enhanced Living at Evangelical Manor
License #: 176380

Dear Ms. Virgile:

As a result of the Department of Human Services' licensing inspection on March 11, 2015 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 must be maintained.

Your regular license for the period June 2, 2015 to June 2, 2016 was issued on March 9, 2015. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink that reads "Matthew Jones".

Matthew J. Jones
Director

MJ

Enclosure
License Inspection Summary

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

PCH Name: Wesley Enhanced Living at Evangelical Manor		License Number: 17638
Address: 8401 Roosevelt Boulevard, Philadelphia, PA 19152		County: Philadelphia
Administrator: Sylvia Virgile		Region: SOUTHEAST
Legal Entity Name: Evangelical Manor, Inc.		
Legal Entity Address: 8401 ROOSEVELT BOULEVARD, PHILADELPHIA, PA 19152		
Certificate(s) of Occupancy		
I-B 12/17/1982 City of Phila Dept of L&I	I-B 12/17/1982 City of Phila Dept of L&I	I-B 12/17/1982 City of Phila Dept of L&I
Staffing Hours		
Resident Support: 0	Total Daily Staff: 49	Waking Staff: 37
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for inspection(s)		
Renewal		
On-Site Inspections Dates and Department Representatives On-Site		
03/11/2015: Keelty, Jennifer; Braswell, Natasha		
Off-Site Inspection Dates and Inspectors, if Applicable		
03/17/2015: Keelty, Jennifer		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 50	Number of Residents who:	
Number of Residents Served: 32	Receive Supplemental Security Income: 0	
Secured Dementia Care Unit in Home: No	Are 60 Years of Age or Older: 32	
Area:	Have Mental Illness: 0	
Secured Dementia Unit Capacity, if Applicable:	Have an Intellectual Disability: 0	
Number of Residents Served in Secured Dementia Care Unit, if applicable:	Have a Mobility Need: 17	
Number of Current Hospice Residents: 0	Have a Physical Disability: 2	
Number of Hospice Residents in past year: 0		

Violation Report: 17638 - 03/11/2015 - Keely, Jennifer
 PCH Name: Wesley Enhanced Living at Evangelical Manor

1. REGULATION 55 Pa.Code §2600

2600.16(c) - The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in section 2600.15 (relating to abuse reporting covered by law).

2a. DESCRIPTION OF VIOLATION

Resident # 1 did not receive the prescribed Ciclopirox Sol 8% throughout December 2014. The home has not submitted an incident report to the Department.

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.

- All personal care med techs have been trained on proper procedure for reporting incidents or conditions to the department of human services regional office.

Personal care med techs are to report all incidents to their supervisors and provide a copy of the incident, the date and time the incident occurred, and the date, time, person of contact from the department of human services.

Personal care administrator does a follow up with the department of human services via fax, email and or phone to ensure incident is reported.

This omission of medication is now reported.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Sylvia Virgite Personal Care Administrator

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Sylvia Virgite Personal Care Administrator

Date

April 24, 2015

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The above plan of correction is approved as of

5/10/15
 (Date)

Plan of correction implementation status as of

5/10/15
 (Date)

The above plan of correction was approved by

JB
 (Initials)

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

Violation Report: 17638 - 03/11/2015 - Keely, Jennifer
 PCH Name: Wesley Enhanced Living at Evangelical Manor

1. REGULATION 55 Pa.Code §2600
 2600.26(a) - The home shall establish and implement a quality management plan.

2a. DESCRIPTION OF VIOLATION

The home did not provide a record of a quality management review conducted in 2014.

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.

- No 2014 records have been located. The personal care administrator is now conducting quality management review to ensure quality improvements are ongoing and appropriate to meet the needs of the residents.

The first quality management meeting was conducted Jan 2015 and will continue on an as needed basis, not less than annually.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Sylvia Virgile Personal Care Administrator.

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Sylvia Virgile Personal Care Administrator

Date

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Violation Report: 17638 - 03/11/2015 - Keelty, Jennifer
 PCH Name: Wesley Enhanced Living at Evangelical Manor

1. REGULATION 55 Pa.Code §2600

2600.54(a) - Direct care staff persons shall have the following qualifications:

- (1) Be 18 years of age or older, except as permitted in § 2600.54(b).
- (2) Have a high school diploma, GED diploma, or active registry status on the Pennsylvania nurse aide registry.
- (3) Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary personal care services with reasonable skill and safety.

2a. DESCRIPTION OF VIOLATION

Direct care staff person A does not have a high school diploma, GED diploma, or active registration status on the Pennsylvania nurse aide registry.

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.

- Personal care administrator will work with the human resources department to make sure all employees have all required paperwork in their file prior the start of employment for the personal care home.

The personal care administrator will keep a copy of personal care employee credentials in a file alone with all state regulated training courses.

The employee's college diploma was submitted to the Department of Human Service office on 03/12/2015 and a copy is in the file.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Sylvia Virgite Personal Care Administrator

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Sylvia Virgite Personal Care Administrator

Date

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 (Initials)

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Violation Report: 17638 - 03/11/2015 - Keely, Jennifer
 PCH Name: Wesley Enhanced Living at Evangelical Manor

1. REGULATION 55 Pa.Code §2600

2600.91 - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

2a. DESCRIPTION OF VIOLATION

Emergency service numbers are not posted near both phones in bedroom R306 or the phone in bedroom M301.

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.

- The personal care administrator will do monthly checks on all personal care residents' phones to make sure the emergency service numbers are posted near the phones in the bedroom.

All phones have emergency contact information.

Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page)			
<i>Sylvia Virgile Personal Care Administrator</i>			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)			Date
<i>Sylvia Virgile Personal Care Administrator</i>			<i>April 24, 2015</i>
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!			
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<i>5/5/15</i> (Date)		<i>5/5/15</i> (Date)	
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<i>[Signature]</i> (Initials)			

Violation Report: 17638 - 03/11/2015 - Keelty, Jennifer
 PCH Name: Wesley Enhanced Living at Evangelical Manor

1. REGULATION 55 Pa.Code §2600
 2600.100(b) - The home shall ensure that ice, snow and obstructions are removed from outside walkways, ramps, steps, recreational areas and exterior fire escapes.

2a. DESCRIPTION OF VIOLATION
 On 3/11/2015, at 11 a.m., the courtyard walkway near the entrance to the chapel was covered in a layer of snow and ice.

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.

- The personal care administrator along with the director of facilities will ensure proper removal of snow and ice in the courtyard walkway and every walkway residents may travel, by checking daily during the winter months, starting 11/16. [Ⓟ]

The patch of snow/ice was immediately removed on 03/11/2015.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Sylvia Virgile Personal Care Administrator

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Sylvia Virgile Personal Care Administrator

Date

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Violation Report: 17638 - 03/11/2015 - Keelty, Jennifer
 PCH Name: Wesley Enhanced Living at Evangelical Manor

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 in room R306 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.

- The personal care administrator will do routine checks of resident's rooms to ensure proper lighting is available at the bedside and that the personal care resident knows how to use the light.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Sylvia Virgile Personal Care Administrator*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Sylvia Virgile Personal Care Administrator* Date *April 24, 2015*

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Violation Report: 17638 - 03/11/2015 - Keely, Jennifer
 PCH Name: Wesley Enhanced Living at Evangelical Manor

1. REGULATION 55 Pa.Code §2600
 2600.141(a)(2) - The medical evaluation must include the following: (1) through (10)

2a. DESCRIPTION OF VIOLATION

The medical evaluation for Resident # 3, signed 2/20/2014, does not include the medical diagnoses, medical information pertinent to diagnoses and treatment, medication regimen, or ability to self-administer medications.

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.

- The personal care administrator will review all medical evaluations, including that of resident #3 to ensure the medical diagnosis, medical information pertinent to diagnoses and treatment, medication regimen or ability to self-administer medications are all completed.

The personal care administrator will review all current medial evaluation forms for accuracy of this information.

Resident #3 has an updated, signed medical evaluation. All other medical evaluation forms are checked and compliant.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Sylvia Virgile Personal Care Administrator*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Sylvia Virgile Personal Care Administrator* Date *April 24, 2015*

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 (Date)

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- Not Implemented

Violation Report: 17638 - 03/11/2015 - Keelty, Jennifer
 PCH Name: Wesley Enhanced Living at Evangelical Manor

1. REGULATION 55 Pa.Code §2600
 2600.141(b)(1) - A resident shall have a medical evaluation at least annually.

2a. DESCRIPTION OF VIOLATION
 Resident # 1's last medical evaluation was completed on 2/13/2013.
 Resident # 2's last medical evaluation was completed on 8/13/2013.

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.

- The personal care administrator will contact the doctors of resident #1 and resident #2 to get updated medical evaluation forms.

The personal care administrator will review all medical evaluation forms for all personal care residents to ensure all forms meet regulations standards as described in regulation 2600.141 (6) (7).

Resident #1 and resident #2 have current medical evaluation forms.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Sylvia Virgile Personal Care Administrator*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Sylvia Virgile Personal Care Admin.* Date *April 04, 2015*

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Violation Report: 17838 - 03/11/2015 - Keelly, Jennifer
 PCH Name: Wesley Enhanced Living at Evangelical Manor

1. REGULATION 55 Pa.Code §2600
 2600.171(b)(5) - If staff persons or volunteers of the home provide transportation for the residents, the vehicle must have a first aid kit with the contents in § 2600.96 (relating to first aid kit).

2a. DESCRIPTION OF VIOLATION
 On 3/11/2015, the home's Honda Odyssey did not have a first aid kit.

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.

- All vehicles will be inspected routinely to ensure every vehicle have first aid kits with the contents described in regulation 2600.96

1st aid kit in all vehicles including the Honda Odyssey.

Repeat Violation: Yes	Date(s) of Previous Violation(s):	03/04/2015
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Sylvia Virgile Personal Care Administrator*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Sylvia Virgile Personal Care Administrator* Date *April 24, 2015*

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Violation Report: 17638 - 03/11/2015 - Keally, Jennifer
 PCH Name: Wesley Enhanced Living at Evangelical Manor

1. REGULATION 55 Pa.Code §2600
 2600.185(a) - 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.

2a. DESCRIPTION OF VIOLATION
 The medication administration record indicates Resident # 1 did not receive the prescribed Ciproflox Sol 8% at 8 a.m. on 12/13/14, 12/15/14, 12/20/14, 12/21/14, 12/23/14, 12/27/14, 12/28/14, and 12/31/14 because the medication was not available.
 On 3/11/2015, the following medications were not available in the home for Resident # 4:
 Meclizine tab 12.5 mg, as needed
 Nitrostat SL tab 0.4 mg, as needed
 Polyethylene Glycol Powder 255 gm, as needed

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.

- The personal care administrator will conduct monthly reviews on all medication administration records for each personal care resident.

Personal care med techs are trained to call the pharmacy if a medication is not available and then to contact the doctor of that resident to report the medication was not given. Personal care med techs will report to the personal care supervisors the name of the residents along with the medication that was missed. The personal care med tech supervisors will report all occurrences to the personal care administrator within their shift.

The personal care administrator will contact the resident's family and contact pharmacy and doctor's office with follow up instructions.

Resident's #1 prescription for Ciproflox Sol 8% has been issued a discontinue script.

Resident #4 medications have come in from the pharmacy.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Sylvia Virgile Personal Care Administrator*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Sylvia Virgile Personal Care Administrator* Date *April 24, 2015*

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Violation Report: 17638 - 03/11/2015 - Keelly, Jennifer
 PCH Name: Wesley Enhanced Living at Evangelical Manor

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

2a. DESCRIPTION OF VIOLATION
 The home did not follow the directions of the prescriber for Resident # 1 to receive Ciclopirox Solution 8% at 8 a.m. for the entire month of December 2014.

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 repeatedly refused medication, which then expired; discontinue order not obtained. The medication Ciclopirox Solution 8% at 8am was discontinued from residents #1 medication record as of 03/12/2015.

Personal care med techs are trained to report all refusals of medications to the personal care administrator immediately. Personal care administrator will report refusals of medications to the residents' family and attending physician and get a prescription to discontinue the medication if the physician chooses.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Sylvia Virgile Personal Care Administrator*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Sylvia Virgile Personal Care Administrator* Date *April 24, 2015*

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Violation Report: 17638 - 03/11/2015 - Keely, Jennifer
 PCH Name: Wesley Enhanced Living at Evangelical Manor

1. REGULATION 55 Pa.Code §2600

2600.227(d) - Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services.

2a. DESCRIPTION OF VIOLATION

A Patient Progress Note for Resident # 1 indicates that the resident had complained of hallucinations on 1/21/2015. The Resident's Assessment-Support Plan, dated 2/23/2015, does not include this need.

There is no finalization date listed on the Resident Assessment-Support Plan for Residents # 1, 2, 3, and 5.

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.

- Personal care administrator provided training to all personal care staff on proper documentation on the resident assessment support plan.

All resident assessment support plan will be reviewed each time a resident makes a complaint, is seen by their doctor and or goes to the hospital to ensure accuracy.

Personal care administrator will review resident assessment support plans routinely to ensure accuracy of information.


Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Sylvia Virgie Personal Care Administrator*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Sylvia Virgie Personal Care Administrator* Date *April 24, 2015*

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Violation Report: 17638 - 03/11/2015 - Keely, Jennifer
 PCH Name: Wesley Enhanced Living at Evangelical Manor

1. REGULATION 55 Pa.Code §2600
 2600.252 - Each resident's record must include the following information: (1) through (26)

2a. DESCRIPTION OF VIOLATION
 Resident # 3's record does not include a photograph of the resident that is no more than two years old.
 Resident # 5's record does not include a photograph of the resident.

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.

- New photographs have been taken of resident #3 and resident #5 to be added to their medical record and chart. Personal care staff provided with training on regulation 2600.252 and the importance of keeping an updated photograph of each personal care resident

All personal care residents' charts were reviewed and new photographs added.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Sylvia Virgile Personal Care Administrator*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Sylvia Virgile Personal Care Administrator* Date *April 24, 2015*

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