



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE:

MAR 21 2016

Ms. Linda M. Curto, Administrator
Paul's Run, Inc.
9896 Bustleton Avenue
Philadelphia, Pennsylvania 19115

RE: Paul's Run
Building B, Floors 3 & 4
License #: 176990

Dear Ms. Curto:

As a result of the Department of Human Services' licensing inspection on June 17, 2015 and June 18, 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.

Sincerely,

A handwritten signature in black ink, appearing to read "Patricia Adams", written over a horizontal line.

Patricia Adams
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

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

PCH Name: Paul's Run Inc.		License Number: 17699
Address: 9896 Bustleton Avenue, Philadelphia, PA 19115		County: Philadelphia
Administrator: Linda Curto		Region: SOUTHEAST
Legal Entity Name: Paul's Run		
Legal Entity Address: 9896 BUSTLETON AVENUE, PHILADELPHIA, PA 19115		
Certificate(s) of Occupancy NM NM		
Staffing Hours		
Resident Support:	Total Daily Staff: 76	Waking Staff: 57
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Complaint		
On-Site Inspections Dates and Department Representatives On-Site 06/18/2015: McIlvain, Shawn		
Off-Site Inspection Dates and Inspectors, if Applicable 06/17/2015: McIlvain, Shawn		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 170 Number of Residents Served: 76 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: 2 Number of Hospice Residents in past year: 8		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 76 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 0 Have a Physical Disability: 0

Violation Report: 17699 - 06/17/2015 - McIlvain, Shawn
 PCH Name: Paul's Run Inc.

1. REGULATION 55 Pa.Code §2600
 2600.225(c) - The resident shall have additional assessments as follows:
 (1) Annually.
 (2) If the condition of the resident significantly changes prior to the annual assessment.
 (3) At the request of the Department upon cause to believe that an update is required.

2a. DESCRIPTION OF VIOLATION
 The resident # 1's Documentation of Medical Evaluation form dated 7/22/15 states " needs 24 hour supervision". The residents' assessment, dated 8/9/14, indicates moderate supervision and states "resident requires some supervision in the home and needs attendance when outside the home, and/or tends to wander". The home's assessment does not reflect the need for 24 hour supervision.

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.

Attachment Pg. 1

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Linda M. Curto*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Linda M. Curto</i>	Date <i>9-8-15</i>
---	--------------------

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

The above plan of correction is approved as of <i>2/29/14</i> (Date)	Plan of correction implementation status as of <i>2/29/14</i> (Date)
The above plan of correction was approved by <i>[Signature]</i> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Attachment: Plan of Correction

Violation Report: 17699 – 6/17/2015 – McIlvain, Shawn

PCH Name: Paul's Run

1. REGULATION 55 Pa. Code §2600

2600. 225 (c) – The resident shall have additional assessments as follows:

- (1) Annually
- (2) If the condition of the resident significantly changes prior to the annual assessment
- (3) At the request of the Department upon cause to believe that an update is required

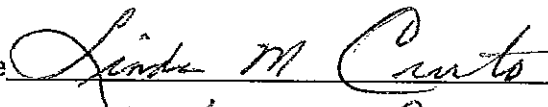
2. DESCRIPTION OF VIOLATION

The resident #1's Documentation of Medical Evaluation form dated 7/22/15 states "needs 24 hour supervision". The residents' assessment, dated 8/9/14, indicates moderate supervision and states "resident requires some supervision in the home and needs attendance when outside the home, and/or tends to wander". The home's assessment does not reflect the needs for 24 hour supervision.

3. PLAN OF CORRECTION

- A. Plan of action to audit all charts to assure that the DME and Residents' Assessments have same accurate information and in compliance with Regulation 225 (c)
Audit being done by PC Nurse Manager and monitored by PC Administrator.
Date of completion: 9/30/15
- B. Physician and Nurse Practitioner were notified that if a resident needs 24 hour supervision an alternate placement would be necessary and not appropriate for our Personal Care.
Date of completion: 9/22/15
Monitored by PC Nurse Manager
- C. In-Service being done by PC Nurse Manager on Regulation 225(c) that Nursing Staff are required to review DME, RASP and Residents' Assessment to assure that it reflects the appropriate plan of care based on assessments and DME and are consisted with each other.
Date of completion: 9/30/15
- D. Charts will be audited quarterly on Regulation 225(c) as part of our Quality Management
Audit will be done by Nursing Staff and PC Nurse Manager
Monitored by PC Administrator
Completion Date: ongoing

Signature of Legal Entity Representative



Printed Name and Title of Legal Entity Representative

Linda M Curto Date 9/24/15