



pennsylvania
DEPARTMENT OF HUMAN SERVICES

DEC 02 2015

Ms. Dawn M. Baker, RN, Administrator
Manor Personal Care, Inc.
6730 Tabor Avenue
Philadelphia, Pennsylvania 19111

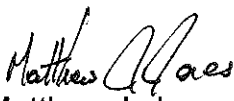
RE: Tabor Manor
License #: 116980

Dear Ms. Baker:

As a result of the Department of Human Services' annual licensing inspections on September 1, 2015 and November 12, 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,


Matthew J. Jones
Director_{15H}

Enclosure
License Inspection Summary

Violation Report: 11698 - 09/01/2015 - Braswell, Natasha
 PCH Name: TABOR MANOR

1. REGULATION 55 Pa. Code §2800
 2600.85(a) - Sanitary conditions shall be maintained.

2a. DESCRIPTION OF VIOLATION

On 9/1/15, resident # 1, #2, #3 and #4's glucometers were checked for accuracy and to ensure that each resident has their own. Based on the results of the review it was determined that resident #1's glucometer was used to check the blood glucose level of resident #2 and resident #3's glucometer was used to check resident #4's blood glucose levels.

Resident #1 and #3 glucometers were discarded and replaced with new machines. All staff were *be completed*
 immediately In serviced on proper use of glucometers, to be used on assigned residents ONLY.
 Supervisor will monitor all glucometers weekly to ensure glucometers are used as ordered and will report discrepancy to Administrators.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Dawn Baker</i>	Date <i>10/22/15</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of *11/12/15*
 (Date)

Plan of correction implementation status as of *11/12/15*
 (Date)

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

The above plan of correction was approved by *[Signature]*
 (Initials)

Violation Report: 11698 - 09/01/2015 - Braswell, Natasha
 PCH Name: TABOR MANOR

1. REGULATION 56 Pa.Code §2600
 2600.88(a) - Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

- Water damage was observed on the wall, near bed #2 in room #19.
- The top layer of plywood on the side exterior door of the home, next to the smoking area, is not firmly secure to the door underneath it.

The wall in room #19 over bed # 2 has been checked by maintenance and repaired.

The exterior door were examined by maintenance, new doors were ordered with an expected delivery and installation date approximately at the end of November 2015.

Housekeeping and maintenance will monitor the home daily and report all needed repairs immediately to the supervisor.

The supervisor will perform walking rounds weekly and report all needed repairs to the administrators.

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Dawn Baer* Date *10/22/15*

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

The above plan of correction is approved as of 10/24/15
 (Date)

Plan of correction implementation status as of 10/24/15
 (Date)

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

The above plan of correction was approved by *[Signature]*
 (Initials)

Violation Report: 11698 - 09/01/2015 - Braswell, Natasha
 PCH Name: TABOR MANOR

1. REGULATION 55 Pa. Code §2600
 2600.93(a) - Each ramp, interior stairway and outside steps must have a well-secured handrail.

2a. DESCRIPTION OF VIOLATION

Two metal supports located at the front of the pavilion, which extends from the front door to the end of the sidewalk, are unsecure and loose. The metal supports provide stability to the railings on both sides of the steps and walkway as well as the metal awning above.

The 2 metal supports located at the front of the pavilion were repaired and are now secure.

Housekeeping will monitor the grounds daily and report needed repairs immediately to the supervisor.

Supervisor will perform weekly rounds and immediately report needed repairs to the administrators.

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Drew Balent* Date *10/22/15*

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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

Violation Report: 11698 - 09/01/2015 - Braswell, Natasha
 PCH Name: TABOR MANOR

1. REGULATION 55 Pa.Code §2600
 2600.95 - Furniture and equipment must be in good repair, clean and free of hazards.

2a. DESCRIPTION OF VIOLATION
 The freezer located inside the pantry, near the door, does not close securely.

The freezer near the door did not properly seal due to ice build-up around the top of the freezer. Staff removed all food items and placed them in another freezer. Upon defrosting the freezer staff rechecked the sealant freezer noted to be properly sealed.

Kitchen worker will check all refrigerators and freezers daily to ensure all equipment is in good repair and working properly.

The supervisor will make rounds of the building weekly to ensure the home is in compliance with DHS regulations.

Repeat Violation; No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page)	<i>Donna Beal</i>
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
<i>Donna Beal</i>	<i>10/22/15</i>

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

The above plan of correction is approved as of 10/26/15
 (Date)

Plan of correction implementation status as of 10/26/15
 (Date)

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

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

Violation Report: 11698 - 09/01/2015 - Braswell, Natasha
 PCH Name: TABOR MANOR

1. REGULATION 55 Pa.Code §2600
 2600.96(a) - The home shall have a first aid kit that includes nonporous disposable gloves, antiseptic, adhesive bandages, gauze pads, thermometer, adhesive tape, scissors, breathing shield, eye coverings and tweezers.

2a. DESCRIPTION OF VIOLATION
 The first aid kit in the medication room does not include: goggles, mouth shield, tweezers, and scissors.

At the time of inspection, supplies missing from the first aid kit were immediately replaced. Direct care staff were instructed to immediately report to supervisor when supplies are used from the kit to ensure the home is in compliance with DHS regulations.

The supervisor will monitor all first aid kits weekly to ensure all needed items are present and usable.

The supervisor will immediately replace needed items.

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Down Bacon* Date *10/22/15*

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 (Date)

Plan of correction implementation status as of 11/2/15
 (Date)

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 (Initials)

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- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 11698 - 09/01/2015 - Braswell, Natasha
 PCH Name: TABOR MANOR

1. REGULATION 55 Pa.Code §2600
 2600.100(a) - The exterior of the building and the building grounds or yard must be in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION
 - A pair of cement side supports for a bench was observed in the side yard propped up against the chain link fence and posing a tripping hazard
 - There were piles of fallen branches and dry leaves, next to the smoking area of the home, presenting a fire hazard.
 - The fiber material used as an underlay for gravel placement on the ground, located in the side yard and next to the smoking area, is fraying. Large pieces of the material have rolled up with use, as the gravel is kicked about, posing a tripping hazard for the residents.

At the time of inspection, the cement bench supports were immediately removed from the yard.

The branches and dried leaves were gathered and removed from the yard.

Housekeeping immediately cut away the fraying fiber material in the yard.

Housekeeping will monitor the yard daily and immediately remove all hazardous material.

The supervisor will monitor the grounds weekly and ensure no hazardous material are present.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Natasha Braswell</i>	Date <i>10/22/15</i>
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Violation Report: 11698 - 09/01/2015 - Braswell, Natasha
 PCH Name: TABOR 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 beds located in rooms #1, #2, #5, and #13 do not have a source of light that can be turned on/off from bedside.

The bedside lights in rooms #1, #5 and #13 were replaced and are operable. Direct care staff will check the lights in each resident room, daily to ensure that all lights are operable and immediately report discrepancies to the supervisor.

The supervisor will perform weekly rounds in building to ensure the home remains in compliance with DHS regulations. If repairs are needed the supervisor will report all findings to the administrator.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Donna Balent</i>	Date <i>10/22/15</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 10/26/15
 (Date)

Plan of correction implementation status as of 10/26/15
 (Date)

The above plan of correction was approved by *[Signature]*
 (Initials)

- Fully Implemented
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- Not Implemented

Violation Report: 11698 - 09/01/2015 - Braswell, Natasha

PCH Name: TABOR MANOR

1. REGULATION 55 Pa. Code §2600

2600.103(f) - Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

2a. DESCRIPTION OF VIOLATION

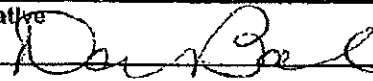
On 9/1/15, there was no thermometer in the kitchen refrigerator located next to the door.

The thermometer in the kitchen refrigerator was immediately replaced. Kitchen staff will check all refrigerators and freezers for present thermometers that they are functioning properly. And report to supervisor if replacements are needed. The supervisor will perform weekly rounds, checking all refrigerators and freezers to ensure thermometers in present and functioning.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)



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

Dawn Baker

Date


10/22/15

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(Date)

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- Not Implemented

The above plan of correction was approved by 
(Initials)

Violation Report: 11698 - 09/01/2016 - Braswell, Natasha
 PCH Name: TABOR MANOR

1. REGULATION 65 Pa.Code §2600
 2600.103(g) - Food shall be stored in closed or sealed containers.

2a. DESCRIPTION OF VIOLATION

- Seven bags of bagels, two packages of meatballs, three packages of hamburger, six packages of chicken and 2 packages of fish sticks were observed in the freezer unlabeled and undated.
- An open package of noodles was observed in the kitchen pantry.

All open, unlabeled and dated food items were immediately discarded. Kitchen staff will check food daily to ensure all food is properly stored, dated and labeled. The supervisor will check food items weekly to ensure all food items are labeled, dated and properly stored.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Dawn Baker</i>	Date <i>10/22/15</i>
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- Fully Implemented
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- Not Implemented

Violation Report: 11698 - 09/01/2015 - Braswell, Natasha

PCH Name: TABOR MANOR

1. REGULATION 56 Pa.Code §2600

2600.103(l) - Outdated or spoiled food or dented cans may not be used.

2a. DESCRIPTION OF VIOLATION

- On 9/1/2015, at 11:35 am, an open package of pierogies, with freezer burns, was observed in the freezer inside the pantry.

- On 9/1/15, A container of cottage was observed in the kitchen refrigerator. The sides of the container had burst open; leaking it's contents.

All open, unlabeled and dated food items were immediately discarded. The freezer was defrosted and cleaned. Kitchen staff will check food daily to ensure all food is properly stored, dated and labeled. The supervisor will check food items weekly to ensure all food items are labeled, dated and properly stored.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

[Handwritten Signature]

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

Down Baker

Date

10/22/15

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(Date)

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[Handwritten Initials]
(Initials)

Violation Report: 11698 - 09/01/2015 - Braswell, Natasha
 PCH Name: TABOR MANOR

1. REGULATION 55 Pa.Code §2600
 2600.103(j) - Eating, drinking and cooking utensils shall be washed, rinsed and sanitized after each use by a method specified in 7 Pa.Code Chapter 46, Subchapter D (relating to equipment, utensils and linen).

2a. DESCRIPTION OF VIOLATION
 On 9/1/15, staff member A was observed washing dishes. Staff member A did not follow the recommended sanitation method for cleaning eating, drinking and cooking utensils after use.

Supervisor and Administrator interviewed staff A, where Staff A was able to verbalize proper procedure, step by step, for washing and sanitizing dishes. Staff A is Serv Saf certified. Staff A was immediately suspended for willful misconduct.

Administrator reviewed proper procedure for washing and sanitizing dishes with all staff. The supervisor will monitor kitchen staff, weekly to ensure proper sanitizing procedures are performed daily. All adverse reactions are to be reported immediately to the administrator.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Dawn Baker</i>	Date <i>10/22/15</i>
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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

Violation Report: 11698 - 09/01/2015 - Braswell, Nalasha
 PCH Name: TABOR 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 residents # 5 and # 6 does not include the height and weight .

Medical Evaluations for residents #5 and #6 were updated with resident height and weight. The RN/administrator checked and updated all medical evaluations.

MD Informed to ensure all information is completed on medical evaluations. The supervisor will monitor medical evaluations, monthly for completion. The administrator will monitor medical evaluations quarterly for completions.

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Dawn Baker* Date *10/22/15*

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The above plan of correction is approved as of *10/26/15*
 (Date)

Plan of correction implementation status as of *10/26/15*
 (Date)

The above plan of correction was approved by *[Signature]*
 (Initials)

- Fully Implemented
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- Not Implemented

Violation Report: 11698 - 09/01/2015 - Braswell, Natasha
PCH Name: TABOR MANOR

1. REGULATION 55 Pa. Code §2600
2600.144(c)(1) - Proper safeguards inside and outside of the home to prevent fire hazards involved in smoking, including providing fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the home, extinguishing procedures, fire resistant furniture both inside and outside the home and fire extinguishers in the smoking rooms.

2a. DESCRIPTION OF VIOLATION

The home's designated smoking area has patio umbrellas attached to the tables. The umbrellas are not fire resistant.

At the time of inspection, patio umbrellas were immediately removed. The home will only purchase fire retardant items for use in the home. The supervisor will make weekly rounds in the home to ensure the home is in compliance to DHS regulation.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
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Printed Name and Title of Legal Entity Representative
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Dawn Baker

Date 10/22/15

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