



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: JUN 28 2016

Ms. Lea B. Sargent, Owner/President
Divinity Manor LLC
932-34 North 42nd Street
Philadelphia, Pennsylvania 19104

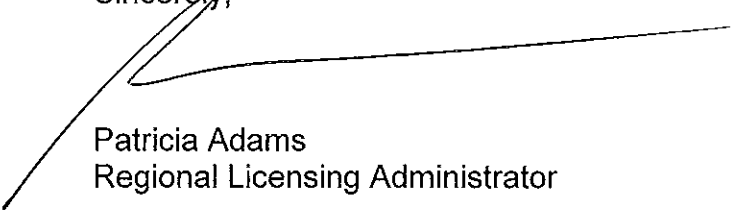
RE: Divinity Manor
License #: 138740

Dear Ms. Sargent:

As a result of the Department of Human Services' licensing inspection on October 29, 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,



Patricia Adams
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

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

PCH Name: DIVINITY MANOR		License Number: 13874
Address: 932 34 NORTH 42ND STREET, PHILADELPHIA, PA 19104		County: Philadelphia
Adminlstrator: Lea Sargent		Region: SOUTHEAST
Legal Entity Name: DIVINITY MANOR LLC		
Legal Entity Address: 932-34 NORTH 42ND STREET, PHILADELPHIA, PA 19104		
Certificate(s) of Occupancy		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 29	Waking Staff: 22
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for inspection(s) Monitoring		
On-Site Inspections Dates and Department Representatives On-Site 10/29/2015: Keppel, Autumn; Braswell, Nafasha		
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: 30 Number of Residents Served: 28 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: 0 Number of Hospice Residents in past year: 0	Number of Residents who: Receive Supplemental Security Income: 28 Are 60 Years of Age or Older: 11 Have Mental Illness: 28 Have an Intellectual Disability: 28 Have a Mobility Need: 1 Have a Physical Disability: 1	

Violation Report: 13874 - 10/29/2015 - Keppel, Autumn
PCH Name: DIVINITY MANOR

1. REGULATION 55 Pa.Code §2600
2600.85(b) - There may be no evidence of infestation of insects or rodents in the home.

2a. DESCRIPTION OF VIOLATION
On 10/29/15, there were five large bed bugs and one small bed bug crawling in the sheets of the bed on the right side of room #5. There was also multiple bed bugs crawling on and in a pair of shoes located on the floor next to the bed, and multiple dead bugs on the floor beneath the bed.

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.

infested shoes have been dried in dryer for 1 full hour and placed in resident closet. Dead bed bugs on the floor beneath the bed have been swept and discarded. Bed sheets with bugs were placed in the dryer for 1 hour on high heat. Thereafter, the sheets were washed and dried again to ensure bug removal.

Exterminator came out, as he does monthly, and provided treatment. After treatment, staff applied 90% alcohol and baby powder to the area. All mattresses have been changed with infestation and monthly bed bug facts + treatment solutions are provided for staff. The home will be sure to train staff on a monthly basis how to treat and monitor for bed bugs to prevent further occurrences beginning March 2016. [by March 31st]

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Stephanie A. Sargent*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) Stephanie A. Sargent Date 3-8-16

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

The above plan of correction is approved as of 5/25/16
(Date)

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

Plan of correction implementation status as of 5/25/16
(Date)
 Fully Implemented
 Partially Implemented - Adequate Progress
 Partially Implemented - Inadequate Progress
 Not Implemented

Violation Report: 13874 - 10/29/2015 - Keppel, Autumn
PCH Name: DIVINITY 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 upholstered couch located in the common area was soiled and sagging and in need of repair.

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.

AS OF NOVEMBER 2015, brand new leather couches have replaced the soiled and sagging couch. The leather couches are wiped and cleaned daily to maintain cleanliness. The couches are also monitored daily for any damages and/or hazards. Staff and residents will be trained on the importance of upkeeping the furniture by March 31st 2016, and every 3 months thereafter. The furniture was purchased with a warranty in the case that any damages occur. 5 years of free repair is available. Administrator will take care of prompt repairs if needed. Staff will be trained to monitor the furniture condition as well as the importance of how the condition of the furniture and equipment affects the environment, i.e. bed bug infestation. Complete within 30 days of completion of POC. (M) (M)

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Stephanic A. Sargent

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

Stephanic A. Sargent

Date 3-8-16

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The above plan of correction was approved by (Initials)

(M)
(Initials)

Violation Report: 13874 - 10/29/2015 - Keppel, Autumn
PCH Name: DIVINITY 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 10/29/15, the middle refrigerator and freezer, and the freezer to the right of it, both of which are located in the basement, did not have a thermometer.

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 freezers and refrigerators in the basement and the kitchen have thermometers. Daily checks are made by staff to ensure that the thermometers are present in the freezers and refrigerators.

Staff will be trained by March 31st 2016 about freezer and refrigerator thermometers and that they need to be present in the appliance at all times.

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Stephanie A. Sargent*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Stephanie A. Sargent* Date *3-8-2016*

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(Date)

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

Plan of correction implementation status as of *3/25/16*
(Date)

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Violation Report: 13874 - 10/29/2015 - Keppel, Autumn
PCH Name: DIVINITY MANOR

1. REGULATION 55 Pa.Code §2600
2600.103(i) - Outdated or spoiled food or dented cans may not be used.

2a. DESCRIPTION OF VIOLATION

-On 10/29/15, two packs of shaved chicken and one pack of shaved beef was found in a basement refrigerator and were severely freezer burned.
- On 10/29/15, an opened bag of freezer burned chicken was found in the chest freezer located in the basement.

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.

AS OF November 1, 2015, all freezer burned meats + items have been discarded. Cook will monitor foods in freezer on a weekly basis to ensure nothing gets burned. Also, foods will be used in the order received and according to expiration dates.

Training will be provided by March 31, 2016 about food in freezer and freezer burned items. There will be a system of monitoring food put into place by the administrator and the cooks involvement will be welcome.

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

Signature of Legal Entity Representative (Required on EVERY Page) *Stephanie A. Sargent*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Stephanie A. Sargent Date 3-8-2016

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