



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAY 25 2016

Ms. LeeAnna Purnell, Director/Owner
Labor of Love, Inc.
2029 North 62nd Street
Philadelphia, Pennsylvania 19151

RE: Labor of Love – Building 1
License #: 145570

Dear Ms. Purnell:

As a result of the Department of Human Services' annual licensing inspection on March 29, 2016 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 "Jay Bausch".

Jay Bausch
Deputy Secretary

Enclosure
License Inspection Summary

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

PCH Name: LABOR OF LOVE BUILDING 1		License Number: 14557
Address: 2029 NORTH 62ND STREET, PHILADELPHIA, PA 19151		County: Philadelphia
Administrator: Robert Cox		Region: SOUTHEAST
Legal Entity Name: LABOR OF LOVE INC		
Legal Entity Address: 2029 NORTH 62ND STREET, PHILADELPHIA, PA 19151		
Certificate(s) of Occupancy R-2 04/15/1987 City of Philadelphia		
Staffing Hours Resident Support: 0 Total Daily Staff: 9 Waking Staff: 7		
Type of Inspection: Full		BHA Docket Number: Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 03/29/2016: Kazimer, Lauren		
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: 11 Number of Residents Served: 9 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: 7 Are 60 Years of Age or Older: 5 Have Mental Illness: 6 Have an Intellectual Disability: 3 Have a Mobility Need: 0 Have a Physical Disability: 0	

Violation Report: 14557 - 03/29/2016 - Kazimer, Lauren
 PCH Name: LABOR OF LOVE BUILDING 1

1. REGULATION 55 Pa.Code §2600
 2600.85(d) - Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

2a. DESCRIPTION OF VIOLATION
 The first floor shared bathroom trash can does not have a lid.

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 Violation has been corrected. The trashcan has been replaced with one that has a lid.
 The Administrator will check daily for future compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Robert B. Cox*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *ROBERT B. COX, ADMINISTRATOR* Date *APRIL 24, 2016*

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

The above plan of correction is approved as of <i>5/6/16</i> (Date)	Plan of correction implementation status as of <i>5/6/16</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

Violation Report: 14557 - 03/29/2016 - Kazimer, Lauren
 PCH Name: LABOR OF LOVE BUILDING 1

1. REGULATION 55 Pa.Code §2600
 2600.101(r)(2) - Window coverings must be clean, in good repair, provide privacy and cover the entire window when drawn.

2a. DESCRIPTION OF VIOLATION
 The blinds on the left side window, in the third floor front room, are broken.

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 Violation has been corrected. The blind has been replaced with a shade. The resident That sleeps there, bends the blinds back to look out of the window.
 The Administrator will check daily for future compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Robert B. Cox*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>ROBERT B. COX - ADMINISTRATOR</i>	Date <i>APRIL 24, 2016</i>
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Violation Report: 14557 - 03/29/2016 - Kazimer, Lauren
 PCH Name: LABOR OF LOVE BUILDING 1

1. REGULATION 55 Pa.Code §2600
 2600.102(j) - Towels and washcloths shall be in the possession of the resident in the resident's living space unless the resident has access to the home's linen supply.

2a. DESCRIPTION OF VIOLATION
 In the second floor common bathroom, there was a washcloth with no label hanging on the towel rack by the sink.

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 Violation was corrected at time of inspection. One of our residents had an incident of incontinence at the time of inspection. He took a shower and left his wash cloth in the bathroom. The Administrator had a meeting with staff to reinforce info. about personal items left in the bathroom and infection controls.

The Administrator will check daily for future compliance.

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

Signature of Legal Entity Representative (Required on EVERY Page) *Robert B. Cox*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *ROBERT B. COX - ADMINISTRATOR* Date *APRIL 24, 2016*

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

The above plan of correction is approved as of *5/6/16*
 (Date)

Plan of correction implementation status as of *5/6/16*
 (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: 14557 - 03/29/2016 - Kazimer, Lauren
 PCH Name: LABOR OF LOVE BUILDING 1

1. REGULATION 55 Pa.Code §2600
 2600.103(e) - Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

- 2a. DESCRIPTION OF VIOLATION
- There were four large plastic bags filled with loaves of bread that were unlabeled and undated.
 - There were two frozen ziplock bags of chicken in the freezer with no label or date.
 - There were two frozen bags of sausage links in the freezer with no label or date.

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 bread was a gift from a Deacon that works at Panera Bread. The chicken & sausage links have been removed. Our Staff has been retrained about food safety.

All Bread and all repackaged items will be labeled from now on.

The Administrator will check weekly for future compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Robert B. Cox*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>ROBERT B. COX - ADMINISTRATOR</i>	Date <i>APRIL 24, 2016</i>
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