



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAY 22 2017

Ms. Janet Virgo,
Administrator
Glen and Janet Virgo
5032 Walnut Street
Philadelphia, Pennsylvania 19139

RE: Walnut Manor
License #: 117190

Dear Ms. Virgo:

As a result of the Department of Human Services' annual licensing inspections on January 5, 2017 and January 20, 2017 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.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink that reads "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

Violation Report: 11719 - 01/05/2017 - Gray, Dean
 PCH Name: WALNUT MANOR

1. REGULATION 55 Pa.Code §2600
 2600.65(f) - Training topics for the annual training for direct care staff persons shall include the following:
- (1) Medication self-administration training.
 - (2) Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
 - (3) Care for residents with dementia and cognitive impairments.
 - (4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
 - (5) Personal care service needs of the resident.
 - (6) Safe management techniques.
 - (7) Care for residents with mental illness or mental retardation, or both, if the population is served in the home.

2a. DESCRIPTION OF VIOLATION

The annual training provided to direct care staff person B in training year 1/2016, did not include self medication administration training.

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.

Annual training was done for staff "B" on medication administration. Attached are copies of certificates for 2015 & 2016

The administrator is responsible for continued compliance. The home will develop a system to ensure continued compliance

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Janet Vingo</i>	Date <i>2/21/17</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 3/3/17
 (Date)

Plan of correction implementation status as of 3/3/17
 (Date)

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

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

Violation Report: 11719 - 01/05/2017 - Gray, Dean
 PCH Name: WALNUT MANOR

1. REGULATION 55 Pa.Code §2600

2600.65(g) - Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:

- (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert.
- (2) Emergency preparedness procedures and recognition and response to crises and emergency situations.
- (3) Resident rights.
- (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101-10225.5102).
- (5) Falls and accident prevention.
- (6) New population groups that are being served at the home that were not previously served, if applicable.

2a. DESCRIPTION OF VIOLATION

Direct care staff person B did not receive training in, fire safety, emergency preparedness procedures, and falls and accident prevention.

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.

Annual training was done for staff "B" on Fire Safety emergency preparedness procedures. Attached are copies of certificates received on training.

Fire safety training shall be completed by a fire safety expert within 30 days
 receipt of approved plan of correction

(Signature)

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Janet Vingo</i>	Date <i>2/21/17</i>
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The above plan of correction was approved by <i>(Signature)</i> (Initials)	<input type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input checked="" type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented
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Violation Report: 11719 - 01/05/2017 - Gray, Dean
 PCH Name: WALNUT MANOR

1. REGULATION 55 Pa.Code §2600
 2600.89(b) - Hot water temperature in areas accessible to the resident may not exceed 120°F.

2a. DESCRIPTION OF VIOLATION
 On 1/6/17, the water temperature at building#5032, 3rd floor sink measured 122.5 Fahrenheit.

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.

Temperature gauge was adjusted to lower the water temperature on the 3rd floor.
 Administrator will periodically check water temperature to ensure compliance and keep safety in check
 The home will maintain written documentation for Department review @

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Janet Virgo	Date 2/21/17
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Violation Report: 11719 - 01/05/2017 - Gray, Dean
 PCH Name: WALNUT 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 1/6/15, the refrigerator and three freezers located in the basement did not have thermometers.

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.

2 Freezers have built in thermometers. One freezer without thermometer was fallen in bottom of freezer at the time of inspection. Replacement was taped now inside freezer door.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Janet Vugro</i>	Date <i>2/1/17</i>
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Violation Report: 11719 - 01/05/2017 - Gray, Dean
 PCH Name: WALNUT MANOR

1. REGULATION 65 Pa.Code §2600
 2600.126(a) - A professional furnace cleaning company or trained maintenance staff person shall inspect furnaces at least annually. Documentation of the inspection shall be kept.

2a. DESCRIPTION OF VIOLATION
 The last inspection of the furnace was conducted on 9/26/13.

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.

Administrator/Maintenance will have professional provide documentation of inspection of furnace annually, can firming everything is operable and ensure compliance and safety.
 The home will complete inspection within 30 days receipt of approved plan of correction.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Janet Virgo	Date 2/21/17
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 (Date)

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

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- Not Implemented

Violation Report: 11710 - 01/05/2017 - Gray, Dean
 PCH Name: WALNUT 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
 Resident #1 is prescribed, Lactulose 10gm/16 sol PRN. On 1/5/17 the medication was not available for administration.

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.

Administrator will request specific length of time any PRN, short term medication should be taken to ensure compliance

The home will perform routine medication audits for continued compliance. Documentation will be retained for department review.

The administrator is responsible for continued compliance @

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Janet Virog* Date *2/21/17*

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- Partially Implemented - Inadequate Progress
- Not Implemented

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Violation Report: 11719 - 01/05/2017 - Gray, Dean
 PCH Name: WALNUT MANOR

1. REGULATION 55 Pa.Code §2600

2600.187(b) - The information in § 2600.187(a)(13) and § 2600.187(a)(14) shall be recorded at the time the medication is administered.

2a. DESCRIPTION OF VIOLATION

On 1/4/17 resident #1's medication administration record was not initialed by direct care staff person B for the administration of Aripiprazole 30mg, Benzotropine 1mg, Haloprazole 10mg, trazodone 10mg, and Venlafaxine 150mg ER administered at 8:00 pm; and the 8:00 am medications, Aspirin 81 mg, Benzotropine 1mg, Clotrim/Beta Cream, and Haloperidol 10mg.

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.

Administrator will initial all MAR upon administration of meds to ensure compliance
 The home will perform routine medication audits for continued compliance. In addition, staff will be trained on recording medication administration. Documentation will be retained for Department review, within 30 days receipt of approved plan of correction

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Janet Vingo	Date 2/2/17
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Violation Report: 11719 - 01/05/2017 - Gray, Dean
 PCH Name: WALNUT MANOR

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

2a. DESCRIPTION OF VIOLATION
 Resident #1's, Clotrim/Beta Cream was not available for administration from 12/17/16-1/5/17.

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.

Administrator will request from Physician documentation showing specific length of time any short term medication should be taken to ensure compliance

Home will train staff on importance of following directions of the provider and documentation, when there is a change. Training will be completed within 30 days receipt of approved POC @

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Janet Virgo*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Janet Virgo* Date *2/2/17*

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Violation Report: 11719 - 01/05/2017 - Gray, Dean
 PCH Name: WALNUT MANOR

1. REGULATION 55 Pa.Code §2600
 2600.188(c) - Documentation of medication errors and the prescriber's response shall be kept in the resident's record.

2a. DESCRIPTION OF VIOLATION
 Resident #1 refused Clotrim Cream. There was no documentation the physician was notified.

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.

Administrator will advise/inform physician of any resident discontinuing medication that's prescribed for temporary use, so documentation will be in place to ensure compliance

The staff will receive training on medication errors within 30 days receipt of approved POC

The administrator is responsible for continued compliance *(Signature)*

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Janet Vingo</i>	Date <i>2/21/17</i>
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