



pennsylvania
DEPARTMENT OF HUMAN SERVICES

SEP 27 2017

Ms. Shelley R. Smith,
Administrator
5224-26 North Broad Street
Philadelphia, Pennsylvania 19141

RE: Broad Street Residence
License #: 176360

Dear Ms. Smith:

As a result of the Department of Human Services' annual licensing inspection on July 11, 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: 17636 - 07/11/2017 - Parker, Shawn
 PCH Name: BROAD STREET RESIDENCE

1. REGULATION 55 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
 In the 2nd floor women's bathroom, the ceiling tile over the 1st stall has a large water stain.

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 leak in the 2nd floor women's bathroom has been repaired and the ceiling tile has been replaced. Monthly monitoring will be completed by staff to identify, walls, ceilings, items, etc. needing repair. This will prevent a similar violation from occurring again.

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

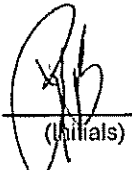
Signature of Legal Entity Representative (Required on EVERY Page) *Shelley R. Smith*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Shelley R. Smith Administrator* Date *7/24/17*

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

The above plan of correction is approved as of 7/31/17
 (Date)

Plan of correction implementation status as of 8/1/17
 (Date)

The above plan of correction was approved by 
 (Initials)

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

Violation Report: 17636 - 07/11/2017 - Parker, Shawn
 PCH Name: BROAD STREET RESIDENCE

1. REGULATION 55 Pa.Code §2600
 2600.101(o) - The bedrooms must have walls, floors and ceilings, which are finished, clean and in good repair.

2a. DESCRIPTION OF VIOLATION
 The wall in the bedroom # 13 on the 3rd floor is in disrepair. The hole in the wall was spackled however needs to be painted.

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 wall in bedroom #13 has been spackled and painted. Monthly monitoring will be completed by staff to identify walls, items, etc. needing repair. This will prevent a similar violation from occurring again.

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Shelley R Smith*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Shelley R. Smith Admin.</i>	Date <i>7/24/17</i>
--	---------------------

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

The above plan of correction is approved as of 7/13/17
 (Date)

Plan of correction implementation status as of 8/1/17
 (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: 17636 - 07/11/2017 - Parker, Shawn
 PCH Name: BROAD STREET RESIDENCE

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 window coverings on the window in bedroom # 12 on the 3rd floor do not work. The blinds do not open when you twist the handle to open them.

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 window covering in bedroom #12 has been replaced with a new blind. Monthly monitoring will be completed by staff to identify items needing repair. This will prevent a similar violation from occurring again.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Shelley R. Smith

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

Shelley R. Smith, Administrator

Date

7/24/17

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

The above plan of correction is approved as of

7/24/17
 (Date)

Plan of correction implementation status as of

8/1/17
 (Date)

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

The above plan of correction was approved by

[Signature]
 (Initials)