



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**Sent via e-mail [shutchins@deer-meadows.org](mailto:shutchins@deer-meadows.org)  
Sent via e-mail [kpatel@deer-meadows.org](mailto:kpatel@deer-meadows.org)  
April 22, 2019**

Ms. Sarah Hutchins  
Residential Administrator  
Deer Meadows Operating II, LLC  
8301 Roosevelt Boulevard  
Philadelphia, Pennsylvania 19152

RE: Deer Meadows Residences  
License #: 141260

Dear Ms. Hutchins:

As a result of the Department's Bureau of Human Services Licensing inspection on September 5, 2018 of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa. Code Ch. 2600 must be maintained.

Sincerely,

*Mia Johnson*

Mia Johnson  
Human Services Licensing Supervisor

Enclosure  
Violation Report

**VIOLATION REPORT**  
**PERSONAL CARE HOMES - 55 Pa.Code Chapter 2800**

PGH Name: DEER MEADOWS RESIDENCES		License Number: 14128
Address: 8301 ROOSEVELT BOULEVARD, PHILADELPHIA, PA 19162		County: Philadelphia
Administrator: Sarah Hutchins		Region: SOUTHEAST
Legal Entity Name: DEER MEADOWS OPERATING II LLC		
Legal Entity Address: 8301 ROOSEVELT BOULEVARD, PHILADELPHIA, PA 19162		
Certificate(s) of Occupancy n/a  n/a		
<b>Staffing Hours</b>		
Resident Support: 0	Total Daily Staff: 88	Working Staff: 65
Type of Inspection: Partial	BVA Booked Number:	Notice: Unannounced
Reason(s) for Inspection(s) Incident		
On-Site Inspection Dates and Department Representatives On-Site 08/05/2018: Gray, Dean; Heinberg, Jennie		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 182 Number of Residents Served: 66 Secured Dementia Care Unit In Home: Yes Area: Secure Unit Secured Dementia Unit Capacity, if Applicable: 20 Number of Residents Served in Secured Dementia Care Unit, if Applicable: 14 Number of Current Hospice Residents: 0 Number of Hospice Residents in past year: 1	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 66 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 20 Have a Physical Disability: 1	

*Sarah Hutchins, Admin 3/26/2019*

Violation Report: 14126 - 03/05/2019 - Gray, Dean

POH Name: DEER MEADOWS RESIDENCES

**1. REGULATION OR Pa.Code §2000**

2600.233(c) - If key-locking devices, electronic cards systems or other devices that prevent immediate egress are used to lock and unlock exits, directions for their operation shall be conspicuously posted near the device.

**2a. DESCRIPTION OF VIOLATION**

The directions for operating the home's locking mechanism are not conspicuously posted near the doors to the secured unit.

**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.

Upon recognition of violation 2600.233 Personal Care Co-Administrator immediately corrected the violation by placing the correct sign with code (see attached Item 1) by both exit doors of the Secured Dementia Unit.

Administrator, Nursing Supervisor or designee will check that the correct sign is in place que every shift daily.

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

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Sarah Hutchins Admin.* Date *3/26/2019*

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

The above plan of correction is approved as of <u>4/19/19</u> (Date)	Plan of correction implementation status as of <u>4/19/19</u> (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