



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to PHILADELPHIA PROTESTANT HOME
LEGAL ENTITY

To operate PHILADELPHIA PROTESTANT HOME
NAME OF FACILITY OR AGENCY

Located at BUILDING 5, FLOORS 2,3,4, 6500 TABOR ROAD, MIDWAY MANOR, PHILADELPHIA, PA 19111
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

To provide Personal Care Homes
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 188
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller. (MAXIMUM CAPACITY)

Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 23

Restrictions: _____

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from January 25, 2019 until January 25, 2020,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **144500**

Robert E. Robinson
ISSUING OFFICER

Carolyn K. Ellison
DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.



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DEPARTMENT OF HUMAN SERVICES

JAN 25 2019

Ms. Mary Ann Parisse
Vice President Residential Living and Personal Care
Philadelphia Protestant Home
6500 Tabor Road, Building 5
Philadelphia, Pennsylvania 19111

RE: Philadelphia Protestant Home
Midway Manor
Building 5, Floors 2, 3, and 4
License #: 144500

Dear Ms. Parisse:

As a result of the Department's Bureau of Human Services Licensing annual inspection on December 17, 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.

A regular license is being issued based on the enclosed violation report. Your license is enclosed.

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 "Jacqueline L. Rowe".

Jacqueline L. Rowe
Director

Enclosure
Violation Report

Violation Report: 14460 - 12/17/2018 - Gillespie, Denise
 PCH Name: PHILADELPHIA PROTESTANT HOME

1. REGULATION 55 Pa. Code §2600
 2600.183(e) - Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

2a. DESCRIPTION OF VIOLATION
 On 12-17-18, the second floor webb medication cart had two loose pills. One pill was a clear yellow oval shape, the other pill was a circular white pill.

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 PC Med Techs, Supervisors and Charge Nurses have been in-serviced on the following

Policies.

Our weekly medication cart audit policy has been revised to include; Supervisors/Charge Nurses when conducting weekly audit will check

For any loose pills in the med cart and if any are found they will be removed and disposed of as per regulations. They will also check the back of the blister cards to ensure they are secure. (see attached policy and in-service sign in sheet)

We also developed a new policy for the Med Tech's, they will now be checking the med cart they are assigned to at the end of their shift to ensure no loose pills are in the cart.

If loose pills are found in the med cart, they are to be removed immediately and taken to the Nursing Office to be disposed of as per regulations.

The Med Tech's will also be checking the blister cards to ensure the packs are secured and will report any wear and tear to Supervisor/Charge Nurse immediately. (see attached policy and in-service sign in sheet)

The PC Nurse Managers and Director of Personal Care Nursing Services will conduct random audits to ensure compliance and report all findings to Administrator.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) Mary Ann Parise, VP Residential Living & Personal Care

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Mary Ann Parise, VP Residential Living & Personal Care Date 1/24/19

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

The above plan of correction is approved as of <u>1-24-19</u> (Date)	Plan of correction implementation status as of <u>1-24-19</u> (Date)
The above plan of correction was approved by <u>SP</u> (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