



**Sent via e-mail slachman@wel.org  
October 29, 2019**

Ms. Suzanne H. Lachman  
Executive Director  
Evangelical Manor, Inc.  
8401 Roosevelt Boulevard  
Philadelphia, Pennsylvania 19152

RE: Wesley Enhanced Living Pennypack Park  
License #: 176380

Dear Ms. Lachman:

As a result of the Department's Bureau of Human Services Licensing inspection on August 7, 2019 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,

*Shawn Parker*

Shawn Parker  
Human Services Licensing Supervisor

Enclosure  
Violation Report

## Violation Report

**Facility Information**

Name: *WESLEY ENHANCED LIVING PENNYPACK PARK*  
 Address: *8401 ROOSEVELT BOULEVARD,, PHILADELPHIA, PA 19152*  
 County: *PHILADELPHIA*                      Region: *SOUTHEAST*

License Number: *17638*

**Administrator**

Name: *Eileen Felicetti*                      Phone: *2156245800*                      Email: *SLACHMAN@WEL.ORG*

**Legal Entity**

Name: *EVANGELICAL MANOR, INC.*  
 Address: *8401 ROOSEVELT BOULEVARD, PHILADELPHIA, PA, 19152*

**Certificate(s) of Occupancy**

Type: *Other*                                      Date:                                      Issued By:

**Staffing Hours**

Resident Support Staff: *0*                      Total Daily Staff: *41*                      Waking Staff: *31*

**Inspection**

Type: *Partial*                                      BHA Docket #:                                      Notice: *Unannounced*  
 Reason: *Complaint*

**Inspection Dates and Department Representative**

*08/07/2019 - On-Site: Tahesia Thomas*

**Resident Demographic Data as of Inspection Dates**

General Information

License Capacity: *50*                                      Residents Served: *36*

Secured Dementia Care Unit

In Home: *No*                      Area:                      Capacity:                      Residents Served:

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *0*                      Are 60 Years of Age or Older: *36*  
 Diagnosed with Mental Illness: *0*                      Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *5*                      Have Physical Disability: *0*

WESLEY ENHANCED LIVING PENNYPACK PARK

17638

60b - Additional Staffing

Regulations

2600.

60.b. The Department may require additional staffing as necessary to protect the health, safety and well-being of the residents. Requirements for additional staffing will be based on the resident's assessment and support plan, the design and construction of the home and the operation and management of the home.

Description of Violation

The home has two direct care workers scheduled for the overnight shift (11 pm - 7 am) to care for 36 residents located on two opposites of the home. The home has a R and M building separated by a long hall. In addition, the residents are located on the third floor of each building. The scheduling of two direct workers and the layout of the building poses a safety risk to the residents.

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.)

There are 2 caregivers on the 11p-7a shift which meets the criteria per regulations. I understand the potential safety risks and there have been no issues to date. Staff is doing rounds every hour and will document any concerns. A third staff member will be added to the overnight shift as needed. As residents care and mobility needs change additional staff will be added to accommodate their needs. Current census is 32 residents. M building 15 mobile residents, R building 14 mobile and 3 immobile.

Legal Entity Representative

Please see attached.....

*Eileen Felicetti*

Eileen Felicetti RCHA

4/19/19

Signature

Printed Name and Title

Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of

10-26-19  
(Date)

Plan of correction implementation status as of

10-26-19  
(Date)

The above plan of correction was approved by

SP  
(Initials)

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

2600.60b

The administrator or designee shall review all resident assessments and support plans immediately to determine the appropriate level of staffing needed to provide the appropriate care and services to each resident, including the appropriate level of staffing to evacuate all residents in the event of an emergency within the safe evacuation specified in writing by the home's fire safety expert. This person shall monitor the staffing schedule weekly to ensure the staffing levels are met to meet the resident's needs.

Appropriate staff levels will be scheduled to provide the level of supervision needed to meet the health and safety needs of residents as identified in the residents' assessments and support plans.

SP 10-26-19