



November 14, 2019

Mr. Austin Virgo
President
Chestnut Manor, LLC
4926 Chestnut Street
Philadelphia, Pennsylvania 19139

RE: Chestnut Manor
License #: 101880

Dear Mr. Virgo:

As a result of the Department's Bureau of Human Services Licensing annual inspection on August 29, 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 (relating to Personal Care Homes) 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, appearing to read "Kevin Hancock".

Kevin Hancock
Deputy Secretary
Office of Long-term Living

Enclosure
Violation Report

Violation Report

Facility Information

Name: CHESTNUT MANOR

License Number: 10188

Address: 4926 CHESTNUT STREET, PHILADELPHIA, PA 19139

County: PHILADELPHIA

Region: SOUTHEAST

Administrator

Name: Austin Virgo

Phone: 2157476327

Email:

Legal Entity

Name: CHESTNUT MANOR LLC

Address: 4926 CHESTNUT STREET, PHILADELPHIA, PA, 19139

Certificate(s) of Occupancy

Type: Other

Date: 05/06/2011

Issued By: City of Philadelphia

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 11

Waking Staff: 8

Inspection

Type: Full

BHA Docket #:

Notice: Unannounced

Reason: Renewal

Inspection Dates and Department Representative

08/29/2019 - On-Site: Michele Swisher

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 13

Residents Served: 11

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 11

Are 60 Years of Age or Older: 8

Diagnosed with Mental Illness: 9

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 0

Have Physical Disability: 0

85a - Sanitary Conditions

Regulations

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

On 8/29/19 there was a blue plastic tub with an original label of Maxwell House coffee grounds that has a layer of sticky greasy dirt/dust and food particles on the outer surface of the container and container lid. The contents of the container appears to be granulated white sugar.

On 8/29/19 there was a metal box of poker/card chips located on the bottom shelf of the kitchen pantry. The box is layered with sticky, greasy black dirt, debris or dust, and food crumbs.

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 items identified have been removed. Staff will check pantry shelves daily as part of their daily checklist to maintain sanitary conditions. The administrator will monitor frequently to ASSESS on going compliance. The Check List will be made Available for Dept. Review

Legal Entity Representative

Austin Virgo
Signature

Austin Virgo Administrator
Printed Name and Title

10/20/19
Date

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

The above plan of correction is approved as of 10-23-19
(Date)

Plan of correction implementation status as of 10-23-19
(Date)

The above plan of correction was approved by SP
(Initials)

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

101j7 - Lighting/Operable Lamp

Regulations

2600.

101.j. Each resident shall have the following in the bedroom:

- 7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

The 3rd floor middle room does not have access to a source of light that can be turned on/off at bedside. The light in the room is not bedside and on 8/29/19 the light was unplugged from the outlet.

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 light has been properly placed and plugged in, the correction was made during the inspection. Management has instructed the resident occupying the room not to unplug or misplace the lamp due to safety concerns. To ensure future compliance staff will add to daily checklist during walk through.

Home did provide verification lamp was placed at bedside. Administrator or designee will ensure all residents have a source of lighting that can be turned on at bedside.

SP 10-23-19

Legal Entity Representative

Austin Virgo
Signature

AUSTIN VIRGO Admin.
Printed Name and Title

10/20/19
Date

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103e - Left Overs

Regulations

2600.

103.e. Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.

Description of Violation

On 8/29/19 there were three unlabeled, undated black plastic containers storing various food items, stored in the freezer located in the dining area.

On 8/29/19 there is a blue container located on the pantry shelf. The container has a label on it for coffee grounds however the contents of the container appears to be granulated white sugar. The container does not have a date or label identifying the contents of the container.

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 repackaged food items have been properly labeled and dated. Staff has been instructed on correct labeling standards. The administrator will provide continuous monitoring to ensure future compliance. Staff Training & Repackaging - will be made available upon Dept. Request.

Legal Entity Representative

Austin Virgo
Signature

Austin Virgo, Admin
Printed Name and Title

10/20/19
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103g - Storing Food

Regulations

2600.
103.g. Food shall be stored in closed or sealed containers.

Description of Violation

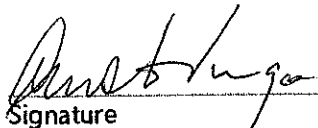
On 8/29/19 a package of bacon in the freezer in the dining area was opened and unsealed.

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 item has been removed. Staff has been reinstructed on the proper storage, labeling and dating of opened food items. Staff will check during the end of their shift that any food items used are correctly stored labeled and dated. Management will monitor and assess weekly to ensure future compliance. TRAININGS will be made available upon Dept. Request

Legal Entity Representative


Signature

AUSTIN VIRGO Admin
Printed Name and Title

10/20/19
Date

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103i - Outdated Food

Regulations

2600.

103.i. Outdated or spoiled food or dented cans may not be used.

Description of Violation

On 8/29/19 there was an opened bag of Domino's confectioner's sugar with and best by date of 9/17/2015 on package and a package of Tomoshiraga Somen Noodles with a best before date of 5/31/19, present on the shelf in the kitchen pantry.

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 items in question have been removed. and a subsequent inspection of the remaining pantry stock was conducted to locate and remove any offending items. Staff will review pantry items at the end of each month to discard any outdated items and the administrator will follow up each month as to ensure ongoing compliance. Pantry & Cabinet will be check weekly for the next two month. check list will be made available upon Dept. Request

Legal Entity Representative

Austin Virgo
Signature

Austin Virgo Admin: 10/20/19
Printed Name and Title Date

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