

Department of Human Services
Bureau of Human Service Licensing

December 13, 2021

██████████, ADMINISTRATOR- OWNER
LABOR OF LOVE INC
2029 NORTH 62ND STREET
PHILADELPHIA, PA, 19151

RE: LABOR OF LOVE-BUILDING 2
2037 NORTH 62ND STREET
PHILADELPHIA, PA, 19151
LICENSE/COC#: 11637

Dear ██████████,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/01/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY

Facility Information

Name: *LABOR OF LOVE-BUILDING 2* License #: *11637* License Expiration:
Address: *2037 NORTH 62ND STREET, PHILADELPHIA, PA 19151*
County: *PHILADELPHIA* Region: *SOUTHEAST*

Administrator

Name: [REDACTED] Phone: *2159212935* Email: [REDACTED]

Legal Entity

Name: *LABOR OF LOVE INC*
Address: *2029 NORTH 62ND STREET, PHILADELPHIA, PA, 19151*
Phone: *2159212935* Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-3 SP* Date: *01/29/1985* Issued By: *City of Philadelphia*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *6* Waking Staff: *5*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *04/01/2021*

Inspection Dates and Department Representative

04/01/2021 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *10* Residents Served: *6*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *5* Are 60 Years of Age or Older: *4*
Diagnosed with Mental Illness: *4* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

04/01/2021 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/22/2021*

04/01/2021 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *06/12/2021*

Inspection Dates and Department Representative (*continued*)

04/01/2021 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

5a1 - DHS Access

General Provisions

1. Requirements

2600.

5.a. The administrator or a designee shall provide, upon request, immediate access to the home, the residents and records to:

- 1. Agents of the Department.

Description of Violation

On 04/23/21 at 1:48pm, an agent of the Department requested access to records. Staff person A refused to provide access until 04/30/21.

Plan of Correction

Accept

I missed an e-mail sent from the inspector on 4/23/21. The Inspector called me on 4/29/21 to inquire about it, I looked back into my e-mails and found it. I responded with the required documents that next morning. A business e-mail has been established and will be checked daily by the Administrator for future compliance.

Completion Date: 05/26/2021

Correction

Implemented

A business e-mail has been established and will be checked daily by the Administrator for future compliance.

Completion Date: 05/26/2021

51 - Criminal Background Check

Staffing

1. Requirements

2600.

51. Criminal History Checks - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Description of Violation

Staff person B was hired on [REDACTED] The criminal background check provided by the home is dated [REDACTED] The employee did not transfer from a home that was established or supervised by the operator.

Plan of Correction

Accept

That was a grievous oversight by me. I thought that the regulation was 2 years prior. I was wrong, it is one year prior. A background check has been obtained for Staff Person B. The Administrator has had a staff meeting and will definitely make sure that any new hires Background Checks are within one year of hire, for future compliance.

Completion Date: 05/27/2021

Correction

Implemented

The Administrator has had a staff meeting and will definitely make sure that any new hires Background Checks are within one year of hire, for future compliance.

Completion Date: 05/27/2021

88a - Surfaces

Physical Site

1. Requirements

Physical Site (continued)

2600.

88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

On 4/1/21, five nails were observed on the ceiling at the fire escape exit door protruding about two inches. In the event this emergency exit were to be utilized, the protrusions cause a hazard to residents.

Plan of Correction

Accept

A repairman has been hired, and the nail problem has been resolved. The Administrator will do a complete check of the premises weekly for any repairs that are needed for future compliance.

Completion Date: 05/26/2021

Correction

Implemented

The Administrator will do a complete check of the premises weekly for any repairs that are needed for future compliance.

Completion Date: 05/26/2021

100a - Exterior - Free of Hazards

Physical Site

1. Requirements

2600.

100.a. The exterior of the building and the building grounds or yard must be in good repair and free of hazards.

Description of Violation

The wood floor on the entrance porch is raised approximately four inches, causing a tripping hazard.

Plan of Correction

Accept

A repairman has been hired, and we are scheduled to have the porch repairs completed within two weeks. The Administrator will do a complete check of the premises weekly for any repairs that are needed for future compliance.

Completion Date: 06/13/2021

Correction

Implemented

A repairman has been hired, and we are scheduled to have the porch repairs completed within two weeks. The Administrator will do a complete check of the premises weekly for any repairs that are needed for future compliance.

Completion Date: 07/14/2021

107c - Food/Water 3 Day Supply

Physical Site

1. Requirements

2600.

107.c. The home shall maintain at least a 3-day supply of nonperishable food and drinking water for residents.

Description of Violation

On 4/01/21, the home served 6 residents. The home did not have nonperishable food available.

Physical Site (continued)

Plan of Correction**Accept**

The non-perishable food items were canned goods with a Sell By Date of 12/13/20. They have been replaced. The Administrator has started a log and will continue to record the sell by dates for shelter in place items. The Administrator will check non-perishable foods monthly for future compliance.

Completion Date: 05/05/2021

Correction**Implemented**

The Administrator will check non-perishable foods monthly for future compliance.

Completion Date: 05/05/2021

107d - Procedure Emergency Management Agency Submission

Physical Site

1. Requirements

2600.

107.d. The written emergency procedures shall be reviewed, updated and submitted annually to the local emergency management agency.

Description of Violation

The home's written emergency procedures have not been submitted to the municipal emergency management agency.

Plan of Correction**Accept**

Our written Emergency Management Procedures were submitted by mail. Proof was shown during the inspection to the inspector. He informed me that they now had to be submitted electronically. We didn't have any knowledge that the Emergency Management Procedures had to be submitted electronically now. For 2021 and going forward, the Administrator will submit our Emergency Management Procedures electronically for future compliance.

Completion Date: 05/26/2021

Correction**Implemented**

For 2021 and going forward, the Administrator will submit our Emergency Management Procedures electronically for future compliance.

Completion Date: 05/26/2021