



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail [REDACTED]
Sent via e-mail [REDACTED]
June 24, 2022

[REDACTED]
[REDACTED]
KayMarie Briddell
[REDACTED]
[REDACTED]

RE: Vine Street Manor
230 North 65th Street
Philadelphia, Pennsylvania 19139
License #: 14234

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on July 16, 2021 of the above facility, we have determined that your submitted plan of correction is not fully implemented. Continued compliance must be maintained.

Sincerely,

Shawn Parker

Shawn Parker
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

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

Facility Information

Name: *VINE STREET MANOR* License #: *14234* License Expiration: *11/02/2021*
Address: *230 NORTH 65TH STREET, PHILADELPHIA, PA 19139*
County: *PHILADELPHIA* Region: *SOUTHEAST*

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]
2158804641 / 334-303-0147

Legal Entity

Name: *KAYMARIE BRIDDELL*
Address: *9157 HOUNSBAY DRIVE, MONTGOMERY, AL, 36117*
Phone: *2158804641* Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *76* Waking Staff: *57*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Incident* Exit Conference Date: *07/16/2021*

Inspection Dates and Department Representative

07/16/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *84* Residents Served: *72*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *49* Are 60 Years of Age or Older: *49*
Diagnosed with Mental Illness: *62* Diagnosed with Intellectual Disability: *7*
Have Mobility Need: *4* Have Physical Disability: *2*

Inspections / Reviews

07/16/2021 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *09/10/2021*

09/14/2021 - POC Submission

Inspections / Reviews (*continued*)

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *09/30/2021*

05/24/2022 - Document Submission

Reviewer: [REDACTED] Follow-Up Type: *Exception* Follow-Up Date:

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [REDACTED] around 10pm, Staff member A instigated an altercation with resident #1. Staff member A didn't want resident #1 to enter the kitchen. Resident #1 wanted to enter the kitchen for a glass of milk. Staff member A pushed resident #1 as the resident was trying to go in the kitchen. As a result, resident #1 fell, fractured their wrist, and was sent to the hospital. Surgery was performed to fix fracture to residents left wrist and resident was discharged back into the home.. Resident #1 along with two other residents who witnessed the incident gave statements detailing the incident. The home's administrator reviewed video footage and states the incident occurred as reported and staff member A was terminated.

Plan of Correction

Directed

The home immediately conducted an investigation after the incident occurred on [REDACTED]. The home's security cameras worked as intended and after reviewing video footage of the event, the home's administrator determined that staff member A instigated the altercation that took place between staff member A and resident #1. Staff member A was immediately terminated from Vine Street Manor due to the event that took place. The home also immediately self reported the incident to all of the appropriate entities and individuals. The administrator completed a training course on abuse and neglect on 08/27/2021. The home has also scheduled re-training for all staff members on abuse and neglect to take place on or before September 30, 2021.

DPOC - 09-14-2021

Within 10 business days of receipt of this POC, the administrator shall provide a residents rights training to all staff members. Training should include specific attention on abuse, neglect, dignity, and respect. Documentation of the training shall be provided to the Department for review within 15 business days of receipt of this POC.

Completion Date: Licensee's Proposed Date for POC Implementation 09-29-2021

SP 05-24-2022

Not Implemented

57b - 1 Hour/Day

1. Requirements

2600.

57.b. Direct care staff persons shall be available to provide at least 1 hour per day of personal care services to each mobile resident.

Description of Violation

On 7/4/21, there were 72 residents in the home, requiring a minimum of 76 hours of direct care service. On this day, only 65 hours of direct care staffing was provided.

On 7/5/21, there were 72 residents in the home, requiring a minimum of 76 hours of direct care service. On this day, only 65 hours of direct care staffing was provided.

On 7/6/21, there were 72 residents in the home, requiring a minimum of 76 hours of direct care service. On this day, only 67.5 hours of direct care staffing was provided.

Plan of Correction

Accept

On 07/04/2021 through 07/06/2021 Vine Street Manor had a total of 66 residents in the facility. At the mentioned time period, the facility had 65 Direct Care Service hours. The facility did not consider the 4 residents who use

57b - 1 Hour/Day (continued)

assistive devices to be immobile due to their high functioning and independence. Despite this designation the home's direct care hours were short. The home has made changes to the work schedule that provides the necessary hours of direct care service plus we have added extra direct care staffing hours to cover any new admissions in the short term. Please see attached schedule.

Completion Date: 09/09/2021

SP 05-24-2022

Document Submission

Implemented

57c - 2 Hours/Day**1. Requirements**

2600.

57.c. Direct care staff persons shall be available to provide at least 2 hours per day of personal care services to each resident who has mobility needs.

Description of Violation

On 7/4/21, there were 72 residents in the home, including 4 residents with mobility needs, requiring a total minimum of 76 hours of direct care service. On this date, only 65 hours of direct care staffing was provided.

On 7/5/21, there were 72 residents in the home, including 4 residents with mobility needs, requiring a total minimum of 76 hours of direct care service. On this date, only 65 hours of direct care staffing was provided.

On 7/6/21, there were 72 residents in the home, including 4 residents with mobility needs, requiring a total minimum of 76 hours of direct care service. On this date, only 67.5 hours of direct care staffing was provided.

Plan of Correction

Accept

On 07/04/2021 through 07/06/2021 Vine Street Manor had a total of 66 residents in the facility. At the mentioned time period, the facility had 65 Direct Care Service hours. The facility did not consider the 4 residents who use assistive devices to be immobile due to their high functioning and independence. Despite this designation the home's direct care hours were short. The home has made changes to the work schedule that provides the necessary hours of direct care service plus we have added extra direct care staffing hours to cover any new admissions in the short term. Please see attached schedule.

Completion Date: 09/09/2021

SP 05-24-2022

Document Submission

Implemented

57d - Waking Hours**1. Requirements**

2600.

57.d. At least 75% of the personal care service hours specified in subsections (b) and (c) shall be available during waking hours.

Description of Violation

On 7/4/21, a total of 76 hours of direct care was required. However, only 50 of the required hours, or 66 percent, were provided during waking hours.

On 7/5/21, a total of 76 hours of direct care was required. However, only 50 of the required hours, or 66 percent, were provided during waking hours.

57d - Waking Hours (continued)

On 7/6/21, a total of 76 hours of direct care was required. However, only 52.5 of the required hours, or 69 percent, were provided during waking hours.

Plan of Correction**Accept**

Facility has adjusted the schedule. Schedule now has 77% of PCH available during waking hours.

Please see attached schedule.

Completion Date: 09/09/2021

SP 05-24-2022

Document Submission**Implemented**