



**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**  
**MAILING DATE: June 29, 2022**

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

RE: Vine Street Manor  
230 North 65th Street  
Philadelphia, Pennsylvania 19139  
License #: 142341

Dear [REDACTED]:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) licensing inspections on September 16, and October 1, 2021, and March 31, 2022 of the above facility, the violations specified on the enclosed Licensing Inspection Summaries (LIS) were found.

Based on violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), the Department hereby REVOKES your certificate of compliance 142340 dated November 2, 2021 to November 2, 2022 and issues you a FIRST PROVISIONAL license to operate the above facility. A FIRST PROVISIONAL license is being issued based on your acceptable plan to correct the violations as specified on the LIS. The license dated November 2, 2021 to November 2, 2022 is NOT reinstated upon expiration of this FIRST PROVISIONAL license. This decision is made pursuant to 62 P.S. § 1026 (b)(1) ;(4) and 55 Pa. Code § 20.71(a)(2) ;(3); (4); (5);(6) (relating to conditions for denial, nonrenewal or revocation). Your FIRST PROVISIONAL license is enclosed and is valid from June 29, 2022 to December 29, 2022.

All violations specified on the LIS must be corrected by the dates specified on the report and continued compliance with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), must be maintained. Failure to implement the plan of correction or failure to maintain compliance may result in a revocation of the license.

If you disagree with the decision to issue a PROVISIONAL license, you have the right to appeal through hearing before the Bureau of Hearings and Appeals, Department of Human Services in accordance with 1 Pa. Code Part II, Chapters 31-35.

[REDACTED]

If you decide to appeal your PROVISIONAL license, a written request for an appeal must be received within 10 days of the date of this letter by:

Jeanne Parisi, Bureau Director  
Pennsylvania Department of Human Services  
Bureau of Human Services Licensing  
Room 631, Health and Welfare Building  
625 Forster Street  
Harrisburg, Pennsylvania 17120  
PH: 717-214-1304

This decision is final 11 days from the date of this letter, or if you decide to appeal, upon issuance of a decision by the Bureau of Hearings and Appeals.

Sincerely,

*Jamie F. Buchenauer*

Jamie Buchenauer  
Deputy Secretary  
Office of Long-term Living

Enclosure  
Licensing Inspection Summary

cc:

[REDACTED]

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

**Facility Information**

Name: *VINE STREET MANOR* License #: *14234* License Expiration: *11/02/2022*  
Address: *230 NORTH 65TH STREET, PHILADELPHIA, PA 19139*  
County: *PHILADELPHIA* Region: *SOUTHEAST*

**Administrator**

Name: [REDACTED] Phone: *2158804641* [REDACTED] Email: [REDACTED]

**Legal Entity**

Name: *KAYMARIE BRIDDELL*  
Address: [REDACTED]  
Phone: *2158804641* Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *Other* Date: *10/09/2010* Issued By: *City of Philadelphia, L&I*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *70* Waking Staff: *53*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Incident* Exit Conference Date: *09/16/2021*

**Inspection Dates and Department Representative**

09/16/2021 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *84* Residents Served: *66*

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *0*

**Number of Residents Who:**

Receive Supplemental Security Income: *52* Are 60 Years of Age or Older: *37*  
Diagnosed with Mental Illness: *60* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *4* Have Physical Disability: *0*

**Inspections / Reviews**

**09/16/2021 - Partial**

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *11/15/2021*

Inspections / Reviews (*continued*)

03/03/2022 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *03/14/2022*

05/24/2022 - Document Submission

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

## 15a - Resident Abuse Report

## 1. Requirements

2600.

15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

## Description of Violation

On [REDACTED]/21, at approximately 7:00 am, staff member A threw resident #1 to the floor in the home's dayroom and choked the resident. This incident was reported to staff person B on [REDACTED]/21 around 8:00 am. However, this allegation of abuse, which ultimately resulted in the resident going to the hospital, was not reported to the police.

## Plan of Correction

**Directed**

After the incident, the resident reported to staff person B what happened between staff person A and the resident. The resident refused to report the incident to the police department, but agreed to go to the hospital several hours later. In the future, all abuse cases will immediately be reported to the police department by designated staff members at Vine Street Manor.

DPOC - SP - 03-03-2022

Within 5 calendar days receipt of this POC, the Administrator will develop an abuse reporting policy in accordance with the Older Adult Protective Services Act. Within 10 business days of receipt of this POC, the administrator shall audit existing incident reports and report any suspected abuse. The administrator shall develop abuse reporting policies and a checklist within 10 business days receipt of this POC. Checklist to be updated whenever an abuse claim is made, by administrator or designee. Policy should include method to audit compliance on an on-going basis. Staff to be trained within 10 business days receipt of POC. Documentation of the policy and staff training shall be provided to the Department for review within 10 business days of receipt of this POC.

**Completion Date:** Licensee's Proposed Date for POC Implementation 03-13-22

SP 05-24-22

Not Implemented

## 16c - Written Incident Report

## 1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

## Description of Violation

On [REDACTED]/21, Resident #1 was taken to the hospital via ambulance as a result of an assault by staff member A. The home did not report this incident to the Department.

## Plan of Correction

**Directed**

An incident report was sent to the state department on [REDACTED]/2021. The Administrator spoke to a supervisor representative and the reportable incident was received by the state. The state representative agreed that this violation will be removed.

Please see attached.

DPOC - SP - 03-03-2022

Within 5 calendar days receipt of this POC, the Administrator will develop an incident reporting policy. Incidents will be reported to the Department within 24 hours. Within 10 business days of receipt of this POC, the administrator shall audit existing incident reports and report any incidents that fit the criteria of 16c. The administrator shall develop incident reporting policies and a checklist within 10 business days receipt of this POC. Checklist to be

**16c - Written Incident Report (continued)**

updated whenever an reportable incident is made by administrator or designee. Policy should include method to audit compliance on an on-going basis. Staff to be trained within 10 business days receipt of POC. Documentation of the policy and staff training shall be provided to the Department for review within 10 business days of receipt of this POC.

**Completion Date:** Licensee's Proposed Date for POC Implementation 03-13-22

SP 05-24-22

Not Implemented

**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**

In the early morning on [REDACTED]/21 at approximately 7:00am, there was a physical altercation between Resident #1 and Staff member A. The resident was observed sleeping in the common area dayroom and was asked by the staff member to get up. Staff member A left the area but came back a short time later and the resident had not moved and was still sleeping. Staff member A grabbed at resident #1's hoodie and the resident reacted by jumping up and throwing a punch. Staff member A grabbed resident #1 by the neck and threw [REDACTED] to the floor in the home's dayroom while choking the resident and stating, "I could fuck you up but I'm not going to do that." As a result of this altercation, resident #1 sustained two broken fingers to [REDACTED] right hand. Resident #1 reported to staff member A that [REDACTED] were experiencing pain in [REDACTED] hand. Staff member A responded "it ain't broke" and left for the day. Resident #1 is prescribed Ibuprofen 800 MG as needed for pain. Staff member A failed to assess the the resident or offer any pain medication.

**Plan of Correction**

**Directed**

As a result of the altercation, staff member A was immediately terminated from working at Vine Street Manor. On 09/22/2021, all staff members at Vine Street Manor went through re-training of Resident's Rights, which covered abuse, neglect and dignity & respect of residents.

Please see attached.

DPOC - SP - 03-03-2022

Within 5 calendar days of receipt of this POC, the administrator shall develop a policy on residents rights. Policy shall include strong focus on abuse and neglect. The administrator will be responsible for reviewing and updating the policy annually. All staff shall be trained of the policy update/development within 10 business days receipt of this POC. Documentation of the policy and staff training shall be provided to the Department for review within 10 business days receipt of [REDACTED] POC

**Completion Date:** Licensee's Proposed Date for POC Implementation 03-13-22

SP 05-24-22

Not Implemented

**63d - Certified CPR Staff****1. Requirements**

2600.

63.d. A staff person who is trained in first aid or certified in obstructed airway techniques or CPR shall provide those services in accordance with his training, unless the resident has a do not resuscitate order.

**Description of Violation**

On [REDACTED]/21, resident #1 suffered a hand injury. Staff member A who was present and on duty at the time and failed to render assistance to the resident in accordance with [REDACTED] training.

## 63d - Certified CPR Staff (continued)

**Plan of Correction****Directed**

All staff have been trained in resident rights and abuse, as well as CPR. All staff members are aware of their duties to perform CPR. Staff member A did not perform [REDACTED] duties and was immediately terminated from working at Vine Street Manor.

DPOC - SP - 03-03-2022

Within 5 calendar days of receipt of this POC, the administrator shall develop a policy on First Aid / CPR trained staff. Policy shall include CPR / First Aid staff coverage. The administrator will be responsible for reviewing and updating the policy annually. All staff shall be trained of the policy update/development within 10 business days receipt of this POC. Documentation of the policy and staff training shall be provided to the Department for review within 10 business days of receipt of this POC.

**Completion Date:** Licensee's Proposed Date for POC Implementation 03-13-22

SP 05-24-22

Not Implemented

## 141a 1-10 Medical Evaluation Information

**1. Requirements**

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:

1. A general physical examination by a physician, physician's assistant or nurse practitioner.
2. Medical diagnosis including physical or mental disabilities of the resident, if any.
3. Medical information pertinent to diagnosis and treatment in case of an emergency.
4. Special health or dietary needs of the resident.
5. Allergies.
6. Immunization history.
7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
8. Body positioning and movement stimulation for residents, if appropriate.
9. Health status.
10. Mobility assessment, updated annually or at the Department's request.

**Description of Violation**

Resident #1's medical evaluation dated [REDACTED] 21 did not include the resident's height, weight, and medication regimen.

**Plan of Correction****Directed**

Vine Street Manor has always had proper equipment for physicians to use to measure resident's height and weight. In the future, Vine Street Manor will require physicians to schedule medical evaluations so that a Vine Street staff member will be present to ensure that all medical evaluations include height and weight.

DPOC - SP - 03-03-2022

Within 5 calendar days of receipt of this POC, the administrator shall audit all resident DME's for accuracy and completion. Within 10 business days receipt of this POC, administrator will coordinate and schedule with resident physicians to ensure all annual DME's are completed. All DME's will be kept in resident records for Department review. Administrator will develop a DME tracking checklist within 10 business days receipt of this POC.

**Completion Date:** Licensee's Proposed Date for POC Implementation 03-13-22

SP 05-24-22

Not Implemented

## 185a - Implement Storage Procedures

**1. Requirements**

185a - Implement Storage Procedures (*continued*)

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

**Description of Violation**

Resident #1 is prescribed Loperamide Cap 2 MG as needed. On [REDACTED]/21 this medication was not available in the home.

**Plan of Correction****Directed**

The medication mentioned was formally listed as a PRN medication. The doctor then listed this medication as a regular dose in a blister packet. Medicare Pharmacy and the prescribing doctor failed to inform Vine Street Manor of the change or provide Vine Street Manor with any documentation to discontinue and also didn't provide Vine Street Manor with an updated MAR. In the future, the medication supervisor at Vine Street Manor will perform a weekly audit of blister packs and the MAR. In addition, physicians have been instructed to inform Vine Street Manor when changes are made and Vine Street staff members have been instructed to inform the Med Supervisor and/or Administrator when deviations are recognized on MAR or blister packs to ensure that all resident documents are up to date, and all medication is given as prescribed. Medication staff members have been informed to be aware of all resident medication changes and will ensure that all medication is given as prescribed. However, thankfully the Loperamide medication was given to the resident as prescribed.

DPOC - SP -03-03-2022

Within 5 calendar days receipt of this POC, the administrator will review all resident medication and doctors orders. Prescribed medication will be ordered and in the home immediately. Administrator will update policy and create a checklist within 10 business days receipt of this POC. Policy should include methods to audit compliance on an ongoing basis. Administrator will conduct audits and update checklist at least two times monthly. Medication Administration staff shall be trained on policy developments/updates within 10 business days receipt of POC. and then quarterly thereafter for a year. Documentation of the audit, checklist, and staff training shall be provided to the Department within 10 business days receipt of this POC.

**Completion Date:** Licensee's Proposed Date for POC Implementation 03-13-22

SP 05-24-22

Not Implemented