

Department of Human Services
Bureau of Human Service Licensing

November 21, 2022

[REDACTED]
GLEN AND JANET VIRGO
5032 WALNUT STREET
PHILADELPHIA, PA, 19139

RE: WALNUT MANOR
5032 WALNUT STREET
PHILADELPHIA, PA, 19139
LICENSE/COC#: 11719

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/07/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: WALNUT MANOR License #: 11719 License Expiration: 12/21/2022
Address : 5032 WALNUT STREET, PHILADELPHIA, PA 19139
County: PHILADELPHIA Region: SOUTHEAST

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: GLEN AND JANET VIRGO
Address: 5032 WALNUT STREET, PHILADELPHIA, PA, 19139
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: Other Date: 08/20/2008 Issued By: City of Phila dept of L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 21 Waking Staff: 16

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
Reason: Renewal Exit Conference Date: 09/07/2022

Inspection Dates and Department Representative

09/07/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 27 Residents Served: 21

Secured Dementia Care Unit

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

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 5	Are 60 Years of Age or Older: 12
Diagnosed with Mental Illness: 19	Diagnosed with Intellectual Disability: 2
Have Mobility Need: 0	Have Physical Disability: 0

Inspections / Reviews

09/07/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 11/25/2022

Inspections / Reviews *(continued)*

11/17/2022 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/21/2022

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 11/28/2022

11/21/2022 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/21/2022

Reviewer: [REDACTED]

Follow-Up Type: Not Required

103i - Outdated Food

1. Requirements

2600.

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

Description of Violation

On [REDACTED]/22 at [REDACTED] AM, in the basement freezer there were opened bags of chicken fajitas, string beans, and peas, that were undated after opening

On [REDACTED]/22 at [REDACTED] AM, in the dry food storage in the basement there was 11 cans of corn that expired October 2019, 12 cans of beef ravioli dated sell by 1/13/21, and 20 cans of black eyed peas dated best by 11/21/21.

Repeat: 7/22/21

Plan of Correction

Accept ([REDACTED] - 11/17/2022)

All outdated canned food have been removed and tossed. Direct Staff has been assigned to do inventory and remove anything that is expired or near expiring. This will be conducted on a quarterly basis to maintain compliance.

Licensee's Proposed Overall Completion Date: 11/16/2022

Implemented ([REDACTED] - 11/21/2022)

108 - Firearms & Weapons

2. Requirements

2600.

108. Firearms, weapons and ammunition shall be permitted on the licensed premises of a home only when the following conditions are met:

1. Firearms and weapons shall be contained in a locked cabinet located in a place other than the residents' room or in a common living area.
2. Ammunition shall be contained in a locked area separate from firearms and weapons, and located in a place other than the residents' room or in a common living area.
3. The key to the locked cabinet containing the firearms, weapons and ammunition shall be in the possession of the administrator or a designee.
4. The administrator or a designee shall be the only individual permitted to open the locked cabinet containing the firearms and weapons and the locked area containing the ammunition.
5. If a firearm, weapon or ammunition is the property of a resident, there shall be a written policy and procedures regarding the safety, access and use of firearms, weapons and ammunition. A resident may not take a firearm, weapon or ammunition out of the locked cabinet into living areas.

Description of Violation

Staff member A stated the home does not allow weapons and firearms, however it is not specified in the home's policies and house rules.

Plan of Correction

Accept ([REDACTED] - 11/17/2022)

House Rules have been updated/revised to reflect the prohibition of firearms and weapons. A separate policy has been written and posted that firearms/weapons are prohibited. Signs are also posted to reflect prohibition. Facility will continue to maintain compliance.

Licensee's Proposed Overall Completion Date: 11/16/2022

Implemented ([REDACTED] - 11/21/2022)

121a - Unobstructed Egress

3. Requirements

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

On [redacted]/22 at [redacted] M, the egress from the basement of 5030 was blocked by a gate. The gate had wire tied around it to prevent exiting.

Plan of Correction

Accept ([redacted] - 11/17/2022)

Wire tied around gate leading from street to basement had been since removed. All egress routes will be free and clear of any obstruction to maintain compliance and will be checked by the administrator monthly, starting immediately.

Licensee's Proposed Overall Completion Date: 11/16/2022

Implemented ([redacted] - 11/21/2022)

132e - Fire Drill Sleeping Hours

4. Requirements

2600.

132.e. A fire drill shall be held during sleeping hours once every 6 months.

Description of Violation

There has not been a fire drill conducted during sleeping hours from 1/1/2022 through 8/7/2022.

Plan of Correction

Accept ([redacted] - 11/17/2022)

Fire drills during sleeping hours was conducted 9/14/22 at 11:37pm. In order to maintain compliance, ongoing drill will be conducted within the time requested by governing agency at a minimum every six months by the administrator. The administrator will review the fire drill form to ensure all drills are conducted timely, starting immediately.

Licensee's Proposed Overall Completion Date: 11/16/2022

Implemented ([redacted] - 11/21/2022)

132g - Fire Drills Days/Times

5. Requirements

2600.

132.g. Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

Description of Violation

The home routinely holds fire drills between 9:20am to 9:48am and 10:15PM to 10:35pm. As evidenced by the following drills: 1/8/22 10:15PM, 2/8/22 9:20AM, 3/10/22 10:39PM, 4/18/22 9:38AM, 5/11/22 10:25PM, 6/16/22 9:48AM, 7/9/22 10:35PM, 8/19/22 9:48AM.

Plan of Correction

Accept ([redacted] 11/17/2022)

Fire drills will be conducted at different times and different days of the week for ongoing compliance as regulated by governing agency, by the administrator, starting immediately. The administrator will review the fire drill records monthly to ensure the drills are held at different times and days, starting immediately.

Licensee's Proposed Overall Completion Date: 11/16/2022

132g - Fire Drills Days/Times (continued)

Implemented () - 11/21/2022)

132h - Designated Meeting Place

6. Requirements

2600.

132.h. Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

Description of Violation

During the fire drill on 5/11/22 at 10:25PM, residents did not evacuate to a designated meeting place away from the building or within the fire-safe area.

Plan of Correction

Accept () - 11/17/2022)

Drill conducted on 5/11/22 was Shelter In Place. No future Shelter In Place drill will replace actual fire drills. all future drills will have residents evacuate building completely from building to designated meeting place away from building to ensure compliance is maintained. Starting immediately, the administrator will ensure all resident evacuate the home during a fire drill, at least on a monthly basis, starting immediately. The administrator will review the fire drill record, monthly, to make sure all residents evacuated.

Licensee's Proposed Overall Completion Date: 11/16/2022

Implemented () - 11/21/2022)

183e - Storing Medications

7. Requirements

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

Description of Violation

On 9/7/22 at 9:00AM there were 4 pills (1 blue/white oval, 1 white oval, 2 green circle) under a placemat at the dining table.

Plan of Correction

Accept () - 11/17/2022)

An impromptu resident in service was conducted on 9/7/22 reminding residents of the importance to take their medication when administered and not leaving them on the table or anywhere else. Ongoing resident in service will continue to encourage residents. The administrator will conduct a training on ensuring the med tech observes the resident swallowing the medications during the administration of all medications, by 11/30/22.

Licensee's Proposed Overall Completion Date: 11/16/2022

Implemented () - 11/21/2022)

252 - Record Content

8. Requirements

2600.

252. Content of Resident Records - Each resident's record must include the following information:

1. Name, gender, admission date, birth date and Social Security number.
2. Race, height, weight, color of hair, color of eyes, religious affiliation, if any, and identifying marks.

252 - Record Content (continued)

3. A photograph of the resident that is no more than 2 years old.
4. Language or means of communication spoken or used by the resident.
5. The name, address, telephone number and relationship of a designated person to be contacted in case of an emergency.

Description of Violation

Resident 1's record does not include a photograph of the resident that is no more than 2 years old. Resident 1st picture is dated [REDACTED] 2020.

Plan of Correction

Accept ([REDACTED] 11/17/2022)

Resident's photograph was updated [REDACTED]/22. All files will have same date so no one will be missed. The administrator will audit all resident files to ensure a photo is current, at least annually.

Licensee's Proposed Overall Completion Date: 11/16/2022

Implemented [REDACTED] - 11/21/2022)