

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

February 16, 2024

[REDACTED]  
MANOR PERSONAL CARE INC  
[REDACTED]  
[REDACTED]

RE: TABOR MANOR  
6730 TABOR AVENUE  
PHILADELPHIA, PA, 19111  
LICENSE/COC#: 11698

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/08/2023 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

**Facility Information**

Name: *TABOR MANOR* License #: *11698* License Expiration: *11/30/2023*  
 Address: *6730 TABOR AVENUE, PHILADELPHIA, PA 19111*  
 County: *PHILADELPHIA* Region: *SOUTHEAST*

**Administrator**

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

**Legal Entity**

Name: *MANOR PERSONAL CARE INC*  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *Other* Date: *12/01/1971* Issued By: *City of Philadelphia*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *49* Waking Staff: *37*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Complaint* Exit Conference Date: *12/08/2023*

**Inspection Dates and Department Representative**

*12/08/2023 - On-Site:* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *51* Residents Served: *49*

**Secured Dementia Care Unit**  
 In Home: *No* Area: Capacity: Residents Served:

**Hospice**  
 Current Residents: *0*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *34* Are 60 Years of Age or Older: *33*  
 Diagnosed with Mental Illness: *49* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *0* Have Physical Disability: *0*

**Inspections / Reviews**

**12/08/2023 - Partial**  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *01/07/2024*

**02/02/2024 - POC Submission**  
 Submitted By: [REDACTED] Date Submitted: *02/12/2024*  
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *02/12/2024*

Inspections / Reviews (*continued*)

02/16/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/12/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

5a1 - DHS Access

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 [REDACTED], at [REDACTED], a request for the financial statement for resident funds was request by an agent of the Department. Immediate access to the financial documents was not received at [REDACTED] Staff person A, left the home to get a copy of the financial document; documentation received at [REDACTED].

Plan of Correction

Accept [REDACTED] - 01/29/2024)

Upon request of financial statements for resident funds, staff member A, (administrator and owner) unsuccessfully, attempted to access the statements electronically which took approximately 45min - 1hour. [REDACTED] then notified the financial institute and requested a printed copy. Upon [REDACTED] request, the branch staff, informed staff member A, someone will contact staff member A, when the financial statements are ready for pick-up. At approximately [REDACTED] [REDACTED] staff person A, received a call from the bank, informing [REDACTED] the statements were ready. [REDACTED] Immediately left the home, headed for the bank and returned at about [REDACTED]. Upon return, staff member A, blacked out all persons who were not in question, and presented the statements to the department.

Currently, the home is in the process of updating banking procedures. This will include immediate accessibility of electronic financial statements for each resident that the home assists with financial management. This improvement will allow staff memeber A, immediate access for viewing or printing.

This new process is tentively expected to be completed, no later than [REDACTED].

Once completed, Both the administrator and owner will be debriefed on the new process.

No later then [REDACTED], the administrator will inservice all residents' for whom the home provides financial assistance.

All residents will continue to provide 24 hour notice for access to financial statements or money. The request must be written on the Resident Request Log, located in the administrators office, Monday thru Friday, between the hours of 9am and 2pm.

The home supervisor will check the log daily and notify Staff member A of any request.

Staff member A, will honor the request within 24 hours, unless it is a weekend or holiday.

Beginning [REDACTED], Staff person A, will print financial statements, quarterly for viewing and will have each resident whom the home provides financial assistance, sign and date a copy and keep a copy if they choose.

PCHA will continuento monitor residents financial records, monthly, to ensure compliance.

Licensee's Proposed Overall Completion Date: 01/17/2024

Implemented [REDACTED] 02/16/2024)

20b5 - No Commingling

3. Requirements

2600.

20.b. If the home provides assistance with financial management or holds resident funds, the following requirements apply:

20b5 - No Commingling (continued)

5. Commingling of resident funds and home funds is prohibited.

**Description of Violation**

On [REDACTED], the financial statement was provided, staff person A. noted that resident funds are received and he blacked out personal transactions on the statement. The funds of the residents and the homes transactions are being commingled.

**Plan of Correction**

Accept [REDACTED] - 02/02/2024)

Currently, the home is in the process of updating banking procedures. This will include immediate accessibility of electronic financial statements for each resident whom the home provides financial assistance. This improvement will allow staff member A, immediate access for viewing or printing. New financial process tentively expected to be completed no later than [REDACTED]. This will provide individual account for each resident whom the home provides financial assistance.

Going forward, The owner will ensure an account is established for each new resident that may require financial assistance from the home.

The PCHA will continue to monitor all resident financial records monthly, for accuracy and compliance.

The owner will print resident financial statements quarterly and as requested

Licensee's Proposed Overall Completion Date: 01/17/2024

Implemented [REDACTED] 02/16/2024)

42x - Safeguard

**4. Requirements**

2600.

42.x. A resident has the right to a system to safeguard a resident's money and property.

**Description of Violation**

On [REDACTED], it was identified the home does not provide a safeguard measure to protect the residents' money and/ or property. The home failed to provide a safeguarding system for the [REDACTED] residents residing in the home.

**Plan of Correction**

Accept [REDACTED] - 02/02/2024)

Beginning, [REDACTED], maintenance worker will begin building shelves in 1 designated closet located in the hallway, on each level. The closet will be locked with a key for only staff members will have access. The home expects for the closet to be completely assemble and ready for use by [REDACTED] On [REDACTED], The PCHA will hold a meeting with all staff and residents to explain the systems operation. Beginning [REDACTED] a stackale bin with lid, will be provided for each resident. The bin will contain the residents name and room number. The bin will remain in the locked closet for safe keeping. PCHA will designate a staff member daily per shift. Residents will be given 2 times on 7-3 and 3-11 shifts. No access will be granted on the 11-7 shift. Designated times will be posted on each locked closet and the medroom door. The closet will remain accessible at each assigned time for 20 mintes per floor. The designated staff member will supervise transactions with each open closet. Once finished the closets will be locked and keys returned to the medication room. On [REDACTED], the Supervisor will organize a meeting with staff and residents to obtain feed back . Minutes will be recorded and reviewed by owner and PCHA for possble changes.

Beginning the last thursday in March then monthly thereafter, a meeting will be held with residents and staff to ensure satisfaction.

Licensee's Proposed Overall Completion Date: 01/17/2024

42x - Safeguard (continued)

Implemented [REDACTED] 02/16/2024)

161d - Dietary Needs

5. Requirements

2600.

161.d. A resident's special dietary needs as prescribed by a physician, physician's assistant, certified registered nurse practitioner or dietitian shall be met. Documentation of the resident's special dietary needs shall be kept in the resident's record.

Description of Violation

On [REDACTED], resident [REDACTED] has a known allergy to peanuts. However, on [REDACTED] at [REDACTED], resident [REDACTED] was not given an alternate selection, the resident did not eat the lunch provided by the home.

Plan of Correction

Accept [REDACTED] - 02/02/2024)

on [REDACTED], resident [REDACTED] allergy to peanuts is documented on the medical records and known to all staff members. On [REDACTED], Resident [REDACTED] was offered an alternate for lunch by staff, the owner and PCHA. Resident [REDACTED] refused all offers, stating

" I'm not hungry, I dont want to each lunch."

On [REDACTED], PCHA reviewed all resident records and created a list with resident names and food allergies. A list was posted in the kitchen on the refrigerator, in the medication room and in the medication book.

On [REDACTED], all associates were in-serviced about residents with food allergies and instructed to always offer an alternate meal.

PCHA will continue to monitor resident records for food allergies, monthly and update the list as needed.

Beginning [REDACTED], Owner and cook will ensure alternates are documented daily and visible for resident to see.

Beginning [REDACTED], The supervisor and staff will monitor the menu daily and ensure alternates are visible and available.

Licensee's Proposed Overall Completion Date: 01/17/2024

Implemented [REDACTED] - 02/16/2024)

251b - Record Entries Legible

6. Requirements

2600.

251.b. The entries in a resident's record must be permanent, legible, dated and signed by the staff person making the entry.

Description of Violation

The Financial Transaction record for resident [REDACTED] was written over on the withdrawal entry dated [REDACTED] for [REDACTED].

Plan of Correction

Accept [REDACTED] 01/29/2024)

[REDACTED], at the time of the transaction, initially the resident requested 1 amount and then asked for the amount shown on [REDACTED] before the completion of the initial transaction.

on [REDACTED], PCHA will review all residents financial ledgers for legibility. If record found not clear PCHA will review with resident and have resident place initials and date next to the amount confirming the transaction. going forward if residents change the initial amount requested a new line will be created

Beginning February 2024, PCHA will continue to monitor resident financial ledgers for legibility and accuracy.

251b - Record Entries Legible *(continued)*

Licensee's Proposed Overall Completion Date: 01/17/2024

Implemented [REDACTED] 02/16/2024)