

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

March 6, 2025

[REDACTED] ADMINISTRATOR
BENEVOLENT PERSONAL CARE HOME INC
[REDACTED]

RE: BENEVOLENT PERSONAL CARE
HOME INC
5727 WINDSOR STREET
PHILADELPHIA, PA, 19143
LICENSE/COC#: 14884

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/05/2025 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: *BENEVOLENT PERSONAL CARE HOME INC* License #: *14884* License Expiration: *05/15/2025*
 Address: *5727 WINDSOR STREET, PHILADELPHIA, PA 19143*
 County: *PHILADELPHIA* Region: *SOUTHEAST*

Administrator

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

Legal Entity

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

Certificate(s) of Occupancy

Type: *R-4* Date: *12/16/2021* Issued By: *City of Philadelphia*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *3* Waking Staff: *2*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal* Exit Conference Date: *02/05/2025*

Inspection Dates and Department Representative

02/05/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *4* Residents Served: *3*
 Secured Dementia Care Unit
 In Home: *No* Area: Capacity: Residents Served:
 Hospice
 Current Residents: *0*
 Number of Residents Who:
 Receive Supplemental Security Income: *3* Are 60 Years of Age or Older: *2*
 Diagnosed with Mental Illness: *2* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

02/05/2025 - Full
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/02/2025*

02/26/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *03/05/2025*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/02/2025*

Inspections / Reviews *(continued)*

03/03/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 03/05/2025

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 03/05/2025

03/06/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/05/2025

Reviewer: [REDACTED]

Follow-Up Type: Not Required

3c - Post Current License

1. Requirements

2600.

3.c. The personal care home shall post the current license, a copy of the current license inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

Description of Violation

On 2/5/2024, the home's current license inspection summary was not posted in a conspicuous and public place in the home. It was stored behind the home's license in a picture frame.

Plan of Correction

Accept ([redacted] - 03/03/2025)

On 2/5/2025 after Benevolent PCH had their home inspection the Administrator removed the current license from the current license inspection and separated the copies/ The copies of the license and current license inspection were placed back in two different picture frames and placed in a conspicuous and public place in the personal care home.

On 2/6/2025 The Administrator had a meeting with The House Manager on how important it is to make sure that the current license is separated from the inspection summary. This will be added to our monthly audit report to eliminate this mistake from occurring.

Moving forward and ongoing the Administrator will continue to spot check monthly with the help of the House Manager that all documentation that is relevant to the current license and the inspection summary to ensure that whenever the Benevolent PCH is up for their annual inspection all documentation is correct and present.

Please see Attachment - Current License in Public Place

Licensee's Proposed Overall Completion Date: 02/27/2025

Implemented ([redacted] - 03/06/2025)

141a - Medical Evaluation

3. 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.

Description of Violation

Resident #1's medical evaluation was completed [redacted], but the resident was not admitted to the home until [redacted] more than sixty days later.

Plan of Correction

Accept ([redacted] - 03/03/2025)

ACTION: On 2/6/2025, The Administrator had a meeting With the House Manager to explain how important it is to make sure all DME are filled out correctly and reviewed within 60 days prior or within 30days after admission.

TRAINING: On 02/16/2025, the Administrator trained themselves and staff on the plan of correction to ensure all Medical Evaluation has to be within 60 days prior or within 30 days after admission. The training was held at the facility.

The Administrator also placed a call to Resident's #1 Primary Care Doctor to set up an appointment to get a new Medical Evaluation done. The administrator Currently is waiting for the primary care office to call back to set up

141a - Medical Evaluation (continued)

appt.

ONGOING: Starting 02/22/2025, all DME forms will be reviewed by the Administrator to ensure thorough completion before being filed. DME completion will be reviewed monthly, starting in March 2025

Proposed Overall Completion Date: 02/27/2025

Licensee's Proposed Overall Completion Date: 02/27/2025

Implemented () - 03/06/2025

162c - Menus Posted

4. Requirements

2600.

162.c. Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

Description of Violation

On 2/5/2024, the home's menu was only posted up to the date of 2/9/24.

Plan of Correction

Accept () - 02/26/2025

On 2/7/2025 The Benevolent PCH administrator created menus 1 week in advance so the residents will know in advance what breakfast, lunch, and dinner consist of.

The menu will be placed on the fridge so that all residents can see the menus in a public place.

The administrator will check weekly to make sure that all menus will be posted and dated correctly 1 week in advance.

Proposed Overall Completion Date: 02/25/2025

Licensee's Proposed Overall Completion Date: 02/25/2025

Implemented () - 03/06/2025

187a - Medication Record

5. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

Description of Violation

Resident #2 is prescribed [redacted] However, the resident's medication administration record for February 2025 has instructions for [redacted]

Plan of Correction

Accept () - 02/26/2025

On 2/05/2025 Benevolent PCH administrator checked the MAR and created a new MAR as a part of the POC for Resident #2 to correct the mistake that was documented.

187a - Medication Record (continued)

Moving forward the administrator whenever a MAR is being created for a resident each resident medication will be taken out to compare to each MAR for each resident..

The administrator will make sure to double-check the labels that are created by the pharmacy on the medication bottles to make sure that the information is correct and matches with the right resident, right medication, right dose, right time, right route, right reason, and right documentation.

Benevolent PCH administrators will check weekly to ensure each resident's medication matches their MAR to help eliminate making mistakes.

Proposed Overall Completion Date: 02/25/2025

Licensee's Proposed Overall Completion Date: 02/25/2025

Implemented ([REDACTED] - 03/06/2025)