

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

November 10, 2025

[REDACTED]
LABOR OF LOVE INC
[REDACTED]

RE: LABOR OF LOVE - BUILDING 3
1140 NORTH 63RD STREET
PHILADELPHIA, PA, 19151
LICENSE/COC#: 10189

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/15/2025 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: *LABOR OF LOVE - BUILDING 3* License #: *10189* License Expiration: *06/18/2026*
 Address: *1140 NORTH 63RD STREET, PHILADELPHIA, PA 19151*
 County: *PHILADELPHIA* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *LABOR OF LOVE INC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-1* Date: *12/10/1998* Issued By: *City of Philadelphia*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *6* Waking Staff: *5*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal* Exit Conference Date: *09/15/2025*

Inspection Dates and Department Representative

09/15/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *12* Residents Served: *6*

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

Hospice
 Current Residents: *0*

Number of Residents Who:
 Receive Supplemental Security Income: *6* Are 60 Years of Age or Older: *5*
 Diagnosed with Mental Illness: *6* Diagnosed with Intellectual Disability: *1*
 Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

09/15/2025 Full
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/06/2025*

10/09/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *11/05/2025*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/14/2025*

Inspections / Reviews *(continued)*

10/16/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/05/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 10/17/2025

11/10/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/05/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

18 - Compliance With Laws

1. Requirements

2600.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

Per CARE FACILITY CARBON MONOXIDE ALARMS STANDARDS ACT - ENACTMENT Act of [REDACTED], carbon monoxide alarms must be installed in proximity of, but not less than 15 feet from any fossil-fuel burning device or appliance. The home's furnace in the basement runs on gas. On [REDACTED], there was no carbon monoxide monitor in the home.

Plan of Correction

Accepted [REDACTED] - 10/16/2025

Carbon Monoxide Detectors were purchased from Amazon on Sept. 15, 2025 for Labor of Love. The Administrator ([REDACTED]) installed the smoke detector on 9/17/25 and had a Staff Meeting on Sept. 17, 2025 and instructed all staff to check the Carbon Monoxide Detectors Daily for proper operation. The Administrator ([REDACTED]) will check on the 1st of every month for Future Compliance.

Licensee's Proposed Overall Completion Date: 10/13/2025

Implemented ([REDACTED]) - 11/10/2025

187a - Medication Record

2. Requirements

2600.

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

1. Resident's name.
2. Drug allergies.
3. Name of medication.
4. Strength.
5. Dosage form.
6. Dose.
7. Route of administration.
8. Frequency of administration.
9. Administration times.
10. Duration of therapy, if applicable.
11. Special precautions, if applicable.
12. Diagnosis or purpose for the medication, including pro re nata (PRN).
13. Date and time of medication administration.
14. Name and initials of the staff person administering the medication.

Description of Violation

Resident [REDACTED] is prescribed [REDACTED] once a day at bedtime. This medication has been administered to the resident since at least [REDACTED]; however, it is not included on the resident's September medication administration record.

Plan of Correction

Accepted [REDACTED] - 10/16/2025

Resident [REDACTED] was prescribed [REDACTED] once a day at bedtime. The Medication Log was fixed to account for this medication error at the time of inspection. We have changed our Medication Policy on 9/16/25 and put steps in place to have the med logs double checked when they arrive from the pharmacy at the beginning of each month by 2 of the Administrators [REDACTED] & [REDACTED]. We have also review Chapters 5 and Chapters 8 in the Medication

187a Medication Record (continued)

Administration Training with our Med Tecs on 9/18/25. The Administrators [REDACTED] and [REDACTED] will check Monthly for Future Compliance beginning on Oct. 1, 2025.

Licensee's Proposed Overall Completion Date: 10/13/2025

Implemented [REDACTED] - 11/10/2025)

225c - Additional Assessment**3. Requirements**

2600.

225.c. The resident shall have additional assessments as follows:

1. Annually.
2. If the condition of the resident significantly changes prior to the annual assessment.
3. At the request of the Department upon cause to believe that an update is required.

Description of Violation

Resident [REDACTED] most recent assessment was completed on [REDACTED]

Plan of Correction

Accept [REDACTED] - 10/16/2025)

The residents RASP was updated on Sept. 15, 2025. The Administrator had a Staff Meeting on Sept. 17, 2025 and has put steps in place to have all RASP double checked Monthly by staff members [REDACTED] & Staff Member [REDACTED]. The Administrators [REDACTED] and [REDACTED] did check all RASP on Sept. 16, 2025 and will check monthly for Future Compliance beginning on Oct. 1, 2025 and at the beginning of each month.

Licensee's Proposed Overall Completion Date: 10/13/2025

Implemented [REDACTED] - 11/10/2025)