



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

Sent via email to: [REDACTED]  
MAILING DATE: September 8, 2014

Mr. Stanley P. Pilat, President  
Stabon Manor Personal Care Home, Inc.  
1555 Haak Street  
Reading, Pennsylvania 19602

RE: Stabon Manor Personal Care Home  
License: #205120

Dear Mr. Pilat:

As a result of the Department of Public Welfare's licensing inspection on July 25, 2014 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

*Anne Graziano*  
Anne Graziano  
Regional Licensing Administrator

Enclosure  
Licensing Inspection Summary



Violation Report: 20512 - 07/25/2014 - Rushin, Julianne  
 PCH Name: STABON MANOR PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

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 section 2600.15 (relating to abuse reporting covered by law).

2a. DESCRIPTION OF VIOLATION

The home's "Incident/Unusual Occurrence Report" for resident #1 written by staff person "A" and dated 3/24/14 indicates medications were found in the resident's room at the side of her bed and on her dresser. The medication error was not reported to the Department.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Staff person A has been retrained on all incidents requiring mandatory reporting. Care Coordinator is doing daily checks of all incident reports submitted to ensure that any incident requiring reporting to the department is done in the appropriate time. The home has also started with an electronic medical records system that will alert the care coordinator and the administrator immediately, via email, when an incident report is added to a residents file. The administrator and care coordinator can then access these records from anywhere to better ensure no reportable incident is missed.

Adm/Designer will monitor for ongoing compliance. 09-08-14

Repeat Violation: No	Date(s) of Previous Violation(s):
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Signature of Legal Entity Representative (Required on EVERY Page) *Corinne Kerper*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Corinne Kerper* Date *8/22/14*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 9-8-14  
 (Date)

The above plan of correction was approved by *JK*  
 (Initials)

Plan of correction implementation status as of 9-8-14  
 (Date)

Fully Implemented  
 Partially Implemented - Adequate Progress  
 Partially Implemented - Inadequate Progress  
 Not Implemented

Violation Report: 20512 - 07/25/2014 - Rushin, Julianne  
 PCH Name: STABON MANOR PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600  
 2600.188(b) - A medication error shall be immediately reported to the resident, the resident's designated person and the prescriber.

2a. DESCRIPTION OF VIOLATION  
 The home's "Incident/Unusual Occurrence Report" for resident #1 written by staff person "A" and dated 3/24/14 indicates medications were found in the resident's room at the side of her bed and on her dresser. The medication error was not reported to the resident's physician.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)  
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Staff person A has been retrained on all incidents requiring mandatory reporting. Care Coordinator is doing daily checks of all incident reports submitted to ensure that any incident requiring reporting to the department is done in the appropriate time. The home has also started with an electronic medical records system that will alert the care coordinator and the administrator immediately, via email, when an incident report is added to a residents file. The administrator and care coordinator can then access these records from anywhere to better ensure no reportable incident is missed.

Adm) Designee will monitor for ongoing compliance. 8/9/14

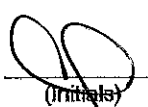
Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page)	Corinne Kerper
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
Corinne Kerper	8/22/14

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- Not Implemented