



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: September 11, 2015

Ms Melissa R. Young, Vice President
Hotel Lebanon Corporation
23-25 South 9th Street
Lebanon, Pennsylvania 17042

RE: American House T/A Hotel
License #: 344040

Dear Ms. Young:

As a result of the Department of Human Services' licensing inspection on July 8, 2015, August 26, 2015, and August 27, 2015 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.

The 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,

A handwritten signature in black ink, appearing to read "Brett Swanger".

Brett Swanger
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

**VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: American House T/A Hotel Lebanon		License Number: 34404
Address: 23-25 South 9th Street, Lebanon, PA 17042		County: Lebanon
Administrator: Melissa Young		Region: CENTRAL
Legal Entity Name: Hotel Lebanon Corporation		
Legal Entity Address: 23-25 South 9th Street, Lebanon, PA 17042		
Certificate(s) of Occupancy A3 C-2 05/15/1987 Labor and Industry		
Staffing Hours Resident Support: 0 Total Daily Staff: 68 Waking Staff: 51		
Type of Inspection: Partial		BHA Docket Number: Notice: Unannounced
Reason(s) for Inspection(s) Complaint		
On-Site Inspections Dates and Department Representatives On-Site 07/08/2015: Swanger, Brett; Bomberger, Cybil 08/26/2015: Swanger, Brett; Bomberger, Cybil 08/27/2015: Swanger, Brett		
Off-Site Inspection Dates and Inspectors, if Applicable 07/07/2015: Swanger, Brett 07/14/2015: Swanger, Brett 07/15/2015: Swanger, Brett		
Other Details Partial or Full Triggers: Random Indicators:		
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 74 Number of Residents Served: 68 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 0 Number of Hospice Residents in past year: 0	Number of Residents who: Receive Supplemental Security Income: 47 Are 60 Years of Age or Older: 36 Have Mental Illness: 59 Have an Intellectual Disability: 9 Have a Mobility Need: 0 Have a Physical Disability: 0	

M Young

Violation Report: 34404 - 07/07/2015 - Swanger, Brett
 PCH Name: American House T/A Hotel Lebanon

1. REGULATION 55 Pa.Code §2600
 2600.15(a) - The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 - 10225.707) and 6 Pa. Code Sections 15.21 - 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

2a. DESCRIPTION OF VIOLATION
 On 6/29/15, Resident #1 reported to staff that on the evening of 6/28/15 while playing a video game with Resident #2 and Resident #3 in Resident #3's bedroom, Resident #2 hit Resident #1 on the back of the head and grabbed Resident #1's testicles. The home failed to immediately report these allegations of possible abuse to the Lebanon County Area Agency on Aging per the Older Adult Protective Services Act.

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.

Any reports from residents of suspected abuse, witnessed or unwitnessed, will be immediately reported to Lebanon County Office of Aging in accordance with the OAPSA.

All staff and administrators were present during staff meeting on July 15th when this regulation was discussed and reviewed.

All staff and administrator will be retrained on the OAPSA by a staff member from the local Lebanon County Agency on Aging office in October of this year as part of annual training.

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

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Melissa E Young VP of Ops* Date *9.8.15*

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

The above plan of correction is approved as of 9/10/15
 (Date)

Plan of correction implementation status as of 9/10/15
 (Date)

The above plan of correction was approved by BAS
 (Initials)

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

Violation Report: 34404 - 07/07/2015 - Swanger, Brett
 PCH Name: American House T/A Hotel Lebanon

1. REGULATION 55 Pa.Code §2600
 2600.15(d) - The home shall immediately notify the resident and the resident's designated person of a report of suspected abuse or neglect involving the resident.

2a. DESCRIPTION OF VIOLATION
 On 6/29/15, Resident #1 reported to staff that on the evening of 6/28/15 while playing a video game with Resident #2 and Resident #3 in Resident #3's bedroom, Resident #2 hit Resident #1 on the back of the head and grabbed Resident #1's testicles. The home failed to report this allegation to Resident #1's designated person.

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.

All staff have been instructed and reminded what needs to be reported to administration immediately. In the future administration will contact the designated person of any resident where there is any allegation of alleged abuse or neglect.

All staff are trained by Area Agency on Aging on a yearly basis.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Melmar Young

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Melissa K. Young, Pot Corp

Date

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Violation Report: 34404 - 07/07/2015 - Swanger, Brett
 PCH Name: American House T/A Hotel Lebanon

1. REGULATION 55 Pa.Code §2600
 2600.42(b) - A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

2a. DESCRIPTION OF VIOLATION
 On 6/28/15, Residents #1 and #2 were playing a video game in Resident #3's bedroom. Resident #1 was struck in the head and had his testicles grabbed by Resident #2. This result in pain, an upset stomach and emotional distress to Resident #1.

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.

All residents living in a personal care home may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Staff will receive training on OAPSA in October of 2015 to review the signs of Abuse, Neglect, Exploitation and Abandonment.

On the date staff was informed of the incident, June 29, 2015, staff met with both Resident #1 and Resident #2 separately to discuss appropriate contact between residents and respecting the personal space of others. Prior to, and every single day since June 28, 2015, Resident #1 has spent a significant amount of time with Resident #2 and Resident #3 in the facility. All three residents were friends before June 28th and continue to be friends since June 28th. There has been no change in their behavior with each other, and Resident #1 did not suffer any injury, on-going pain, or distress from the incident. They all continue to horseplay and pal around in each other's private bedrooms, in the common areas, out front on the sidewalks, and out in the community.

All residents have the right to freely associate, organize, and communicate with others privately and Resident #1 certainly has the right to choose with whom he socializes and what activities they do when they are together. However, to address an incident that may occur in the future, Staff shall monitor the interactions between these residents and when staff see these three residents carrying on with each other in a way that could be considered to fall under 2600.42(b), the staff person will ask them to stop, will provide positive redirection by reminding them of regulation 2600.42(b), and shall again define what is appropriate contact between residents.

In the event that the behaviors of the residents continue and that these behaviors create an environment of intimidation or abuse, where the home feels a resident is a danger to himself or others, or that the home cannot meet the needs of the resident, the home shall issue a 30-day notice of discharge to that resident.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Melissa R. Young*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Melissa R. Young, Hot Corp.* Date *9-8-15*

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