



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail: [REDACTED]
Mailing Date: February 26, 2019

Mr. Stanley P. Pilat
Chief Executive Officer
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's Bureau of Human Services Licensing inspection on January 4, 2019 of the above facility, the citations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read "M. Moskalczyk".

Michele Moskalczyk
Human Services Licensing Supervisor

Enclosure
Violation Report

Violation Report: 20512 - 01/04/2019 - Mendez, Vanessa
 PCH Name: STABON MANOR PERSONAL CARE HOME

1. REGULATION 55 Pa. Code §2600

2600.144(c)(1) - Proper safeguards inside and outside of the home to prevent fire hazards involved in smoking, including providing fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the home, extinguishing procedures, fire resistant furniture both inside and outside the home and fire extinguishers in the smoking rooms.

2a. DESCRIPTION OF VIOLATION

Two residents were observed smoking outside in front of the main entrance where there was a sign stating it was a nonsmoking area.

Upon arrival to the facility, there were approximately 50 cigarette butts littered across the exterior of the front porch and walkway.

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.

Regulation 2600.144 c-1 had been addressed by the Administrator on 1-15-19 at the Resident Council meeting and will continue to be discussed monthly. Since then, our Activity Store no longer carries or sells cigarettes in the Community. Staff on all shifts frequent the main exit and remind residents of the designated smoking area on the side of the building. Maintenance Director and Housekeeping Supervisor do rounds of the outside Community daily and remove all cigarettes. Staff on each shift, prior to leaving, monitor and sweep up unauthorized smoking areas. Residents who refuse to follow this regulation will be given a warning and if behavior continues, a 30-day notice of non-compliance will be issued. Administrator and Asst. Admin will continue to monitor for compliance.

Repeat Violation: Yes	Date(s) of Previous Violation(s):	08/21/2018
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Susaw McClain*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *SUSAN McClain - Admin.* Date *2/11/19*

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

The above plan of correction is approved as of 2-13-19
 (Date)

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

Plan of correction implementation status as of 2-13-19
 (Date)

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

Violation Report: 20512 - 01/04/2019 - Mendez, Vanessa
 PCH Name: STABON MANOR PERSONAL CARE HOME

1. REGULATION 55 Pa.Code §2600

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.

2a. DESCRIPTION OF VIOLATION

Resident #1's RASP dated 09/03/18 was not updated regarding a change in the resident's mental health status reflecting a temporary change in supervision needs.

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.

Going forward, Wellness Director will update all residents RASPs noting and ensuring that residents needs are met as those needs arise. Wellness Director will then inform staff and Administrator at our morning stand-up meeting ensuring all staff are aware of changes. Administrator will do random checks of RASP to ascertain information is reflected on RASP and updated reflecting the change.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Susan McClain

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

Susan McClain - Admin

Date

2/11/19

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