



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to HOTEL LEBANON CORPORATION
LEGAL ENTITY

To operate AMERICAN HOUSE T/A HOTEL LEBANON
NAME OF FACILITY OR AGENCY

Located at 23-25 SOUTH NINTH STREET, LEBANON, PA 17042
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

To provide Personal Care Homes
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 74
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.
(MAXIMUM CAPACITY)

Restrictions: _____

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from May 2, 2019 until November 2, 2019,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **344041**

Robert E. Robinson
ISSUING OFFICER

Carolyn K. Ellison
DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE:

MAY 02 2019

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

RE: American House T/A Hotel Lebanon
License #: 344041

Dear Ms. Young:

As a result of the Department's Bureau of Human Services Licensing inspection on March 14, 2019, March 25, 2019, and April 3, 2019 of the above facility, the citation specified on the enclosed violation report was found.

Based on the violation with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), your current license # 344040 dated January 29, 2019 to January 29, 2020 is **REVOKED**. A **FIRST PROVISIONAL** license is being issued. This **FIRST PROVISIONAL** license replaces all previously issued licenses and is effective for six months from the date of issuance. The license dated January 29, 2019 to January 29, 2020 is **NOT** reinstated upon expiration of this **FIRST PROVISIONAL** license. This decision is made pursuant to 62 P.S. 1026(b)(1) and 55 Pa.Code § 20.71(a)(2) (relating to conditions for denial, nonrenewal or revocation.) Your **FIRST PROVISIONAL** license is enclosed.

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.

If you disagree with the decision to issue a **PROVISIONAL** license, you have the right to appeal through hearing before the Bureau of Hearings and Appeals, Department of Human Services in accordance with 1 Pa.Code Part II, Chs. 31-35. If you decide to appeal your **PROVISIONAL** license, a written request for an appeal must be received within 10 days of the date of this letter by:

Ms. Melissa R. Young

Shivani Patel, Enforcement Manager
Human Services Licensing
Department of Human Services
Room 631, Health and Welfare Building
625 Forster Street
Harrisburg, Pennsylvania 17120

This decision is final 11 days from the date of this letter, or if you decide to appeal, upon issuance of a decision by the Bureau of Hearings and Appeals.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Rowe". The signature is stylized with a large, looping initial "J" and a cursive "Rowe".

Jacqueline L. Rowe
Director

Enclosures
License
Violation Report

**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 NINTH STREET, LEBANON, PA 17042		County: Lebanon
Administrator: Cindy Simpson		Region: CENTRAL
Legal Entity Name: HOTEL LEBANON CORPORATION		
Legal Entity Address: 23-25 SOUTH NINTH STREET, LEBANON, PA 17042		
Certificate(s) of Occupancy A3, C-2 LP 05/15/1987 Labor and Industry		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 67	Waking Staff: 50
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Incident		
On-Site Inspections Dates and Department Representatives On-Site 03/14/2019: Showers, Michael 03/25/2019: Showers, Michael; Heemer, Laura 04/03/2019: Swanger, Brett		
Off-Site Inspection Dates and Inspectors, If Applicable Received: 4/11/19 BAS Received: 4/24/19 BAS		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 74	Number of Residents who:	
Number of Residents Served: 67	Receive Supplemental Security Income: 51	
Secured Dementia Care Unit In Home: No	Are 60 Years of Age or Older: 46	
Area:	Have Mental Illness: 65	
Secured Dementia Unit Capacity, If Applicable:	Have an Intellectual Disability: 7	
Number of Residents Served in Secured Dementia Care Unit, If applicable:	Have a Mobility Need: 0	
Number of Current Hospice Residents: 0	Have a Physical Disability: 0	
Number of Hoaspice Residents In past year: 0		

Myong, 4/11/19

Violation Report: 34404 - 03/14/2019 - Showers, Michael
 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
 Several times between the period of February 1, 2019 and March 11, 2019, Resident #2 engaged in sexual contact with Resident #1. These instances of sexual contact occurred without the consent of 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.

See attached Pages 2A, 2B, 2C, 2D, and 2E

*Direct Care staff and management staff shall attend the training being provided by SARCC in May 2019 resident rights. The training shall have an emphasis on the prevention of resident to resident sexual abuse and mistreatment. BAS 4/24/19 *may 4/24/19*

*Effective May 2019, the administrator or designee will interview at least 5 residents and a sample of staff monthly for at least 6 months to ensure resident rights are protected. The interviews shall address personal boundaries and resident treatment. Documentation of the monthly monitoring will be kept to include, at minimum, names of residents and staff interviewed, concerns, and action taken to address concerns. BAS 4/24/19 *may 4/24/19*

Repeat Violation: No	Date(s) of Previous Violation(s):		
----------------------	-----------------------------------	--	--

Signature of Legal Entity Representative
 (Required on EVERY Page) *Melissa R Young*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Melissa R Young</i>	Date <i>4.11.19</i>
--	------------------------

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!	
The above plan of correction is approved as of <u>4/24/19</u> (Date)	Plan of correction implementation status as of <u>4/25/19</u> (Date)
The above plan of correction was approved by <u>BAS</u> (Initials)	<input type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input checked="" type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

This plan of correction pertains to the report made on 3/11/2019.

No other dates or reports were ever made by Resident 1 to staff or administration that would indicate a violation in 2600.42(b) as suggested in the violation report description of violation.

On 3/11/2019, Resident 1 made report to staff of resident to resident abuse around 4:00am. Staff member assisted her to call the police. Police arrived and did investigation and left. Staff member contacted administration. Administration then made reports to APS and to BHSL, contacted MH/ID caseworker and began initial investigation. Details of this investigation are attached in the initial incident report. As of 4/11/19, the police department has not created a report and only has a record of an officer reporting to the call.

Since alleged incident, staff have all been informed of the allegations with Resident 1 and Resident 2. Staff were informed to have an increase in awareness of contact between these two residents. Staff are to have increased vigilance with the whereabouts and relationships of Resident 2 while having respect for his privacy. Staff are to have increased vigilance on the whereabouts and relationships of Resident 1 while respecting her privacy. Resident 1 was instructed to keep bedroom door locked at all times. Roommate to Resident 1, was instructed to keep bedroom door locked at all times as well. Resident 1 spends most of day outside of home in the community at drop in centers, YMCA and library. RASPS have been updated to reflect alleged incident and increased supervision/awareness while in the home.

Resident 2 was given a 30 day notice on 3/11/2019 and the administration has been working diligently to find placement. Administration has not found a home with any SSI bed openings yet or a home that Resident 2 finds acceptable. A list of homes rejecting placement of resident 2 is attached. Due to Resident 2's low income (without the PCBH supplement) searching for a room to rent has also been challenging. Resident 2 has straight social security income of \$527 a month. Resident also will need to find a new rep payee or become his own payee. Resident 2 will need to apply for food stamps if he ends up living in a rented room. Administration has made multiple calls to local realtors/ property managers in search of a room less than \$130 a week so that Resident 2 would

mgowens 4/11/19

have money for medications and food. As of today, 4/11/2019, no such rooms have been available.

Since alleged incident, Resident 1 has not approached any staff or administration with any more reports. She has not reported any further contact with Resident 2. Her ICM has not been able to make contact with her in over 2 weeks as she is always out of the home. Her ICM reported today that the last time she spoke with Resident 1, she reported feeling safe in the home. However, the ICM also shared with administration, that the last time she (Resident 1) spoke with an investigator, roughly 2 weeks ago, that Resident 1 reported the opposite. Administration and staff have interactions with Resident 1 at every meal and she appears content and stable. She has a daily routine that has not altered since she moved in to the facility. The alleged incident has not caused her to change her habits or her routine. She continues to attend the drop in center, the library and the YMCA. Staff and administration will check in with her daily at med times and ask her if she has any concerns or needs she would like to discuss nonspecifically.

Staff meeting is scheduled 4/24/2019 to discuss reporting concerns with relationships/behaviors to administration in timely matter and to discuss any known relationships, Resident to Resident, so that all staff and administration are aware.

A resident meeting with a SARCC prevention specialist is in the planning stage for April. This meeting would be open to all residents and staff to learn about appropriate/inappropriate sexual relationships, prevention of situations as well as assistance/resources available if needed.

Attached: list of homes, initial incident report

Maria Lopez 4/11/19