



Sent via e-mail to: stabonmanor@comcast.net; stabon@ptd.net
Mailing Date: December 16, 2020

Ms. Susan McClain
Administrator
Stabon Manor Personal Care Home, Inc.
1555 Haak Street
Reading, Pennsylvania 19602

RE: Stabon Manor Personal Care Home
License # 205120

Dear Ms. McClain:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on January 9, 2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Anne Graziano". The signature is written in a cursive, flowing style.

Anne Graziano
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: *STABON MANOR PERSONAL CARE HOME*
Address: *1555 HAAK STREET, READING, PA 19602*
County: *BERKS*

License Number: *20512*

Region: *NORTHEAST*

Administrator

Name: *Susan McClain*

Phone: *6103732272*

Email: *STABON@PTD.NET*

Legal Entity

Name: *STABON MANOR PERSONAL CARE HOME, INC.*
Address: *1555 HAAK STREET, READING, PA, 19602*

Certificate(s) of Occupancy

Type: *C-2 LP*

Date:

Issued By:

Staffing Hours

Resident Support Staff: *0*

Total Daily Staff: *152*

Waking Staff: *114*

Inspection

Type: *Partial*

BHA Docket #:

Notice: *Unannounced*

Reason: *Complaint, Incident*

Inspection Dates and Department Representative

01/09/2020 - On-Site: Ryan Yankowy, Amy Deluca

01/31/2020 - Off-Site: Ryan Yankowy

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *160*

Residents Served: *152*

Secured Dementia Care Unit

In Home: *No*

Area:

Capacity:

Residents Served:

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *97*

Are 60 Years of Age or Older: *83*

Diagnosed with Mental Illness: *65*

Diagnosed with Intellectual Disability: *22*

Have Mobility Need: *0*

Have Physical Disability: *7*

16c - Written Incident Report

Regulations

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

Description of Violation

On 9/14/19, a representative from the Area Agency on Aging came to the home to investigate a complaint of staff to resident abuse. The home did not report this to the department's regional office as required.

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 were not made aware of any resident abuse. Resident called his son case worker to tell them that he was given a 30 day eviction notice as a result of a conversation Administrator and Wellness Director had with him. Resident punched a med. Tech in the face and was screaming profanities due to being asked to take a shower prior to leaving for the day. His behaviors escalated and administrator informed resident this could not continue. Resident continued to call son case workers who informed A.A.A. They came to community under the impression there was a restraint of said resident. Home did not notify regional office due to no abuse or restraint. Report forwarded, a report or call will be made when AAA does any investigations.

Legal Entity Representative

Susan McClain
Signature

Susan McClain
Printed Name and Title Admin.

8/19/2020
Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 9-1-2020
(Date)

Plan of correction implementation status as of 9-1-2020
(Date)

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

Implemented
 Not Implemented

16e - Resident Notice

Regulations

2600.

16.e. If the home's final report validates the occurrence of the alleged incident or condition, the affected resident and other residents who could potentially be harmed or his designated person shall also be informed immediately following the conclusion of the investigation.

Description of Violation

On 10/7/2019, resident #1 was assaulted by his two roommates and suffered scratches to his face. The home did not report the incident to the resident's designated person.

Also, on 9/6/19 and 10/4/19, resident #1 had been taken to area hospitals by police officers while he was out in the community due to his behavior. The home did not keep the family informed of these incidents as they occurred.

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.)

Wellness Director had an inservice with all nursing regarding the importance of keeping family informed as well as police and procedure of filling out incident reports in a timely manner. Staff were instructed to leave said reports on Wellness Director's desk, or Administrator's desk in his absence, so they could be reviewed and/or completed. Staff were instructed that no matter what the incident was family must be aware. All reports are reviewed by Wellness Director and/or Administrator prior to filing or being entered into our Tabula system.

Legal Entity Representative

Susan McQuinn
Signature

SUSAN McQuinn
Printed Name and Title
Admin.

8/19/2020
Date

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227d - Support Plan Medical/Dental

Regulations

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

On 09/12/19, resident #2 became agitated with staff person A and eventually punched staff person A and swung the phone at him. The home did not update the resident's RASP dated 5/21/19 regarding this incident and develop a plan to address this behavior.

Resident #1's RASP dated 8/13/19 was not updated to reflect the following incidents:

The resident was taken to area hospitals on 9/6/19 and 10/2/19 by police officers due to displaying bizarre behaviors. Also, on 10/7/19, resident #1's two roommates assaulted him because the roommates thought he was stealing their clothes.

The home did not document these behaviors or a plan to address the behaviors.

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.)

Administrator Inservice Wellness Director on the importance of Regulation 2600.227d. Administrator explained that this regulation ensures residents needs are met and accountability is demonstrated for any changes to ensure residents safety. Wellness Director will address all RASP updates with Administrator. As changes occur, both Administrator and Wellness Director will be responsible to update RASP.

Legal Entity Representative

Susan McClain
Signature

Susan McClain Admin. 8/19/2020
Printed Name and Title Date

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