

Department of Human Services
Bureau of Human Service Licensing

November 30, 2021

JUDY LEE, ADMINISTRATOR
NORTH PENN MANOR, INC.
240 NORTH SHERMAN STREET
WILKES-BARRE, PA 18702

RE: NORTH PENN MANOR
240 NORTH SHERMAN STREET
WILKES-BARRE, PA, 18702
LICENSE/COC#: 22032

Dear Ms. Lee,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/15/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Anne Graziano

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY**

Facility Information

Name: *NORTH PENN MANOR* License #: *22032* License Expiration Date: *10/08/2022*
 Address: *240 NORTH SHERMAN STREET, WILKES-BARRE, PA 18702*
 County: *LUZERNE* Region: *NORTHEAST*

Administrator

Name: *Judy Lee* Phone: *5708228866* Email:
JUDYLEE1997@PTD.NET; lindscott@pa.gov;
agraziano@pa.gov

Legal Entity

Name: *NORTH PENN MANOR, INC.*
 Address: *240 NORTH SHERMAN STREET, WILKES-BARRE, PA, 18702*
 Phone: *5708228866* Email: *JUDYLEE1997@PTD.NET*

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *05/31/1990* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *54* Waking Staff: *41*

Inspection

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal* Exit Conference Date: *09/15/2021*

Inspection Dates and Department Representative

09/15/2021 - On-Site: Jason Harvey

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *80* Residents Served: *54*

Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *13* Are 60 Years of Age or Older: *47*
 Diagnosed with Mental Illness: *13* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *0* Have Physical Disability: *1*

Inspections / Reviews

11/29/2021 - POC Submission

Lead Reviewer: *Anne Graziano*Follow-Up Type: *Document Submission*Follow-Up Date: *12/06/2021*

11/30/2021 - Document Submission

Lead Reviewer: *Anne Graziano*Follow-Up Type: *Not Required*

103g - Storing Food

1. Requirements

2600.

103.g. Food shall be stored in closed or sealed containers.

Description of Violation

A large bag of frozen chicken located in the home's walk-in cooler was opened and unsealed.

Plan of Correction

Accept

The large bag of frozen chicken in the walk in cooler was sealed on the date of the inspection, 9/15/21, by the Administrator. The cook that came on for the 2nd shift had just gone into the freezer to get some items that he needed and he opened the bag of chicken and left the freezer and was going to go back in to finish up and get the rest of what he needed but he didn't get back there before the freezer was inspected. The Administrator instructed the cook to never leave any item open and unattended and that everything had to be completely sealed before leaving the walk in freezer. All of the dietary staff were in-serviced to follow this regulation on 9/21/21 by the Administrator. The Administrator will monitor the walk in freezer on an ongoing basis to ensure compliance with this regulation.

To complete the 2 Step Plan of Correction Process, (POC), upon Resubmission of the POC, the Adm shall just note see prior submitted documents in Portal.

AG, 11-29-21

Completion Date: 09/21/2021

Document Submission

Implemented

See prior submitted documents in the Portal.

144c1 - Smoking Area Guidelines

1. Requirements

2600.

144.c. A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures that include the following:

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.

Description of Violation

The home's designated smoking area was littered with cigarette butts.

144c1 - Smoking Area Guidelines (continued)

Plan of Correction

Accept

The cigarette butts in the smoking area were cleaned up on the date of inspection, 9/15/21, by Maintenance. The Administrator had a meeting with the residents who smoke on 9/21/21 asking them to please use the receptacles to dispose of their cigarettes at all times. The housekeeping staff were instructed to monitor and clean the smoke area more frequently to ensure that the smoking area is not littered with cigarette butts. The Administrator and Maintenance will monitor the smoking area on an ongoing basis to ensure compliance with this regulation.

To complete the 2 Step Plan of Correction Process, (POC), upon Resubmission of the POC, the Adm may just reference see prior submitted document sent in the Portal.

AG, 11-29-21

Completion Date: 09/21/2021

Document Submission

Implemented

See prior submitted document sent in the Portal

PRIVACY CODING DOCUMENT

Facility Information

Name: *NORTH PENN MANOR*

License #: *22032*

License Expiration Date: *10/08/2022*

Address: *240 NORTH SHERMAN STREET, WILKES-BARRE, PA 18702*

Inspection

Date: *09/15/2021*

Type: *Full*

Staff Privacy Coding

Designation

Staff Members Name

Job Title

Date Hired

Resident Privacy Coding

Designation

Resident's Name

