

Department of Human Services  
Bureau of Human Service Licensing

October 9, 2022

[REDACTED]  
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 [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/04/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Michele Moskalczyk  
Human Services Licensing Supervisor

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: *10/08/2022*  
Address: *240 NORTH SHERMAN STREET, WILKES-BARRE, PA 18702*  
County: *LUZERNE* Region: *NORTHEAST*

**Administrator**

Name: [REDACTED] Phone: *5708228866* Email: [REDACTED]

**Legal Entity**

Name: *NORTH PENN MANOR, INC.*  
Address: *240 NORTH SHERMAN STREET, WILKES-BARRE, PA, 18702*  
Phone: *5708228866* Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *11/22/1989* Issued By: *PALI*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *66* Waking Staff: *50*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Incident* Exit Conference Date: *08/04/2022*

**Inspection Dates and Department Representative**

*08/04/2022 - On-Site:* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *80* Residents Served: *66*

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *0*

**Number of Residents Who:**

Receive Supplemental Security Income: *17* Are 60 Years of Age or Older: *62*  
Diagnosed with Mental Illness: *15* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *0* Have Physical Disability: *2*

**Inspections / Reviews**

*08/04/2022 - Partial*

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *09/04/2022*

Inspections / Reviews (*continued*)

09/28/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: *10/03/2022*

10/09/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

## 183b - Meds and Syringes Locked

## 1. Requirements

2600.

183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

## Description of Violation

*An unlocked and unattended medication cart was observed in the first-floor hallway.*

## Plan of Correction

Accept

*On 8/4/22 the med tech left [REDACTED] cart to administer a PRN medication and inadvertently left the cart unlocked and unattended. When it was brought to our attention the cart was immediately locked by the licensing inspector with staff permission. The med tech told us that [REDACTED] could see the cart from where [REDACTED] was administering the medication but understands that [REDACTED] cannot leave the cart unlocked and step away from it. This staff person was trained on regulation 183b the date of the inspector visit, emphasizing the importance including safety measures, of keeping the med cart locked when the cart is unattended. All of the med techs were subsequently trained on this regulation to stress the importance of compliance with this regulation. (training form is attached). The administrator is also looking into getting medication carts that automatically lock when the drawers are closed. The pharmacy is checking into this for us. The supervising PCA on each shift will be monitoring their med techs on an ongoing basis during each shift to ensure that they are in compliance with this regulation. The administrator will also be monitoring this regulation to ensure that there is ongoing compliance with this regulation.*

**Completion Date:** 08/26/2022

## Document Submission

Implemented

*On 8/4/22 the med tech left [REDACTED] cart to administer a PRN medication and inadvertently left the cart unlocked and unattended. When it was brought to our attention the cart was immediately locked by the licensing inspector with staff permission. The med tech told us that [REDACTED] could see the cart from where [REDACTED] was administering the medication but understands that [REDACTED] cannot leave the cart unlocked and step away from it. This staff person was trained on regulation 183b the date of the inspector visit, emphasizing the importance including safety measures, of keeping the med cart locked when the cart is unattended. All of the med techs were subsequently trained on this regulation to stress the importance of compliance with this regulation. (training form is attached). The administrator is also looking into getting medication carts that automatically lock when the drawers are closed. The pharmacy is checking into this for us. The supervising PCA on each shift will be monitoring their med techs on an ongoing basis during each shift to ensure that they are in compliance with this regulation. The administrator will also be monitoring this regulation to ensure that there is ongoing compliance with this regulation.*

## 227d - Support Plan Medical/Dental

## 1. Requirements

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

*The RASP dated [REDACTED] for Resident 1, was not updated to reflect mental health services being received and fire-starting incident that occurred at the home.*

## Plan of Correction

Accept

*On [REDACTED] the resident's RASP was updated by the Sup PCA with the information from the reportable incident*

227d - Support Plan Medical/Dental (continued)

which occurred on 6/19/22 and the addendum was filed in the resident's chart by the Sup PCA. The RASP addendum is attached. The addendum was actually previously completed but could not be located in the resident's file at the time of the visit. The Sup PCA will monitor the resident's charts on an ongoing basis to ensure that updates to the RASP are documented and appropriately filed in the resident's chart to ensure compliance with this regulation. The administrator will also provide ongoing monitoring of the updated RASP documentation and filing in the resident's charts to ensure compliance with this regulation.

**Completion Date:** 08/26/2022

**Document Submission**

**Implemented**

On [REDACTED] the resident's RASP was updated by the Sup PCA with the information from the reportable incident which occurred on 6/19/22 and the addendum was filed in the resident's chart by the Sup PCA. The RASP addendum is attached. The addendum was actually previously completed but could not be located in the resident's file at the time of the visit. The Sup PCA will monitor the resident's charts on an ongoing basis to ensure that updates to the RASP are documented and appropriately filed in the resident's chart to ensure compliance with this regulation. The administrator will also provide ongoing monitoring of the updated RASP documentation and filing in the resident's charts to ensure compliance with this regulation.