

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

December 28, 2022

[REDACTED] ADMINISTRATOR
NORTH PENN MANOR, INC.
[REDACTED]

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 10/05/2022, 10/06/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: NORTH PENN MANOR License #: 22032 License Expiration: 10/08/2023
Address: 240 NORTH SHERMAN STREET, WILKES BARRE, PA 18702
County: LUZERNE Region: NORTHEAST

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

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

Certificate(s) of Occupancy

Type: C 2 LP Date: 05/31/1990 Issued By: L&I
Type: Other Date: 02/09/2011 Issued By: City of Wilkes Barre

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 59 Waking Staff: 44

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
Reason: Renewal Exit Conference Date: 10/06/2022

Inspection Dates and Department Representative

10/05/2022 On Site [Redacted]
10/06/2022 On Site [Redacted]

Resident Demographic Data as of Inspection Dates

General Information
License Capacity: 80 Residents Served: 58
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: 53
Diagnosed with Mental Illness: 15 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 1 Have Physical Disability: 2

Inspections / Reviews

10/05/2022 - Full
Lead Inspector: [Redacted] Follow Up Type: POC Submission Follow Up Date: 10/30/2022

Inspections / Reviews *(continued)*

11/22/2022 POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/28/2022

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 11/29/2022

12/28/2022 Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/28/2022

Reviewer: [REDACTED]

Follow Up Type: Not Required

81b - Resident Personal Equipment

1. Requirements

2600.

81.b. Wheelchairs, walkers, prosthetic devices and other apparatus used by residents must be clean, in good repair and free of hazards.

Description of Violation

The grab assist bar located on the bed in Room #16 side A is not securely attached to the bed, posing a possible limb or head entrapment.

POC Submission

Accept (█ - 11/22/2022)

The grab assist bar located on the bed in Room #16 was not secured as tightly to the bed as it could be. The grab bar strap was secured tighter to the bed by maintenance on 10/6/22 providing a tighter fit to the bed to ensure the safety of the resident. It was checked and approved by the inspector on the date of the inspection, 10/6/22. Direct Care Staff will monitor the grab bar daily to ensure that it is tightly secured. The administrator will provide ongoing periodic checks to ensure compliance with this regulation.

Licensee's Plan Completion Date: 10/25/2022

Implemented (█ - 12/28/2022)

82a - Poisonous Materials

2. Requirements

2600.

82.a. Poisonous materials shall be stored in their original, labeled containers.

Description of Violation

A spray bottle of blue liquid was located on the cleaning cart without the original manufacturer's label.

POC Submission

Accept (█ - 11/22/2022)

The housekeeper was using a glass cleaner that was not in a labeled container. The housekeeper was instructed by the Administrator on the importance of keeping all poisonous materials stored in their original, labeled containers. The label was appropriately placed on the container on the date of the inspection by the housekeeper and was checked and approved by the inspector on the date of the inspection 10/6/22. The Administrator will monitor all cleaning supplies on an ongoing basis to ensure that all poisonous materials are properly labeled at all times.

Licensee's Plan Completion Date: 10/25/2022

Implemented (█ - 12/28/2022)

88a - Surfaces

3. Requirements

2600.

88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

A small rectangular blue, black and red rug was located outside the sink in the bathroom of Room #9. The rug did not have a slip resistant backing, posing a possible fall hazard.

POC Submission

Accept (█ - 11/22/2022)

The resident had a rug in her bathroom that didn't have a slip resistant backing which could be a potential fall risk for the resident. It was explained to the resident the reason why (█) couldn't keep it there. The resident was in

88a Surfaces (continued)

agreement with removing the rug. The rug was removed on the date of the inspection 10/6/22 by direct care staff and was checked and approved by the inspector on 10/6/22. The Administrator will provide ongoing monitoring of resident rooms to ensure compliance with this regulation.

Licensee's Plan Completion Date: 10/25/2022

Implemented () - 12/28/2022)

129a - Fireplace Screens

4. Requirements

2600.

129.a. A fireplace must be securely screened or equipped with protective guards while in use.

Description of Violation

The electric fireplace located in the homes activity room did not have a screen or guard in place to prevent residents from coming in contact with the heat. The 3 metal slats near the blower measured 140 degrees Fahrenheit.

POC Submission

Directed () - 11/22/2022)

The recreation room has an entertainment center furniture piece which includes an electric decorative fireplace in it that did not come with a screen or guard to prevent residents from coming in contact with the heated area. A screen was installed on 10/7/22 by maintenance to cover the surface of the heated area to prevent residents from coming in contact with the heat. A photo is attached of the installed screen. The Administrator will provide ongoing supervision of regulation 129A to ensure compliance with this regulation.

Directed Plan of Correction:

Please also ensure there is something to keep residents away from the surface of the screen on order to protect residents from coming into contact with hot surfaces, another regulatory requirement. Please send in another photo in Step 2.

AG, 11 22 22

Directed Completion Date: 10/25/2022

Implemented () - 12/28/2022)

187d - Follow Prescriber's Orders

5. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #1 has an order for [redacted] twice daily, hold for systolic blood pressure less than [redacted]. On [redacted] at [redacted] the blood pressure was [redacted], [redacted] at [redacted] the blood pressure was [redacted] at [redacted] the blood pressure was [redacted] the blood pressure was [redacted] the blood pressure was [redacted]. The medication was administered on the above noted days and should have been with held.

POC Submission

Accept () - 11/22/2022)

Resident #1 had a parameter medication that was administered instead of being held on the dates listed above. The medication techs responsible for these administrations were in serviced on this medication error on 10/6/22 by the Administrator. (training form is attached). The resident's physician was notified by the PCA med tech supervisor on

187d Follow Prescriber's Orders (continued)

10/6/22 and he instructed to the med tech staff the importance of following the physician's orders. (Documentation from the physician is attached). An incident report was emailed to DOH on 10/7/22. (copy attached) The Administrator will provide ongoing monitoring of this regulation to ensure compliance with regulation 187d.

Licensee's Plan Completion Date: 10/25/2022

Implemented [REDACTED] - 12/28/2022)