

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

April 22, 2024

[REDACTED]
SYDLYNN INC
[REDACTED]

RE: PARADISE MANOR
206 EAST LINCOLN AVENUE
HATFIELD, PA, 19440
LICENSE/COC#: 14446

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/17/2024, 02/02/2024 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: PARADISE MANOR License #: 14446 License Expiration: 06/26/2024
Address: 206 EAST LINCOLN AVENUE, HATFIELD, PA 19440
County: MONTGOMERY Region: SOUTHEAST

Administrator

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

Legal Entity

Name: SYDLYNN INC
Address: [Redacted]
Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Type: Other Date: 12/31/1981 Issued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 21 Waking Staff: 16

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint, Incident Exit Conference Date: 02/02/2024

Inspection Dates and Department Representative

01/17/2024 - On-Site: [Redacted]
02/02/2024 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information			
License Capacity:	37	Residents Served:	21
Secured Dementia Care Unit			
In Home:	No	Area:	Capacity:
Residents Served:			
Hospice			
Current Residents: 0			
Number of Residents Who:			
Receive Supplemental Security Income:	1	Are 60 Years of Age or Older:	18
Diagnosed with Mental Illness:	9	Diagnosed with Intellectual Disability:	2
Have Mobility Need:	0	Have Physical Disability:	0

Inspections / Reviews

01/17/2024 - Partial
Lead Inspector: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 02/25/2024

02/26/2024 - POC Submission
Submitted By: [Redacted] Date Submitted: 03/13/2024
Reviewer: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 02/29/2024

Inspections / Reviews *(continued)*

03/05/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 03/13/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 03/22/2024

04/22/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/13/2024

Reviewer: [REDACTED]

Follow-Up Type: Not Required

24 - Personal Hygiene

1. Requirements

2600.

24. Personal Hygiene - A home shall provide the resident with assistance with personal hygiene as indicated in the resident's assessment and support plan. Personal hygiene includes one or more of the following:

1. Bathing.
2. Oral hygiene.
3. Hair grooming and shampooing.
4. Dressing, undressing and care of clothes.
5. Shaving.
6. Nail care.
7. Foot care.
8. Skin care.

Description of Violation

The assessment and support plan, dated [REDACTED], for resident [REDACTED] indicates the resident requires assistance with hair grooming and shampooing, nail care. On [REDACTED] the resident did not receive assistance as required.

Plan of Correction

Accept [REDACTED] - 02/26/2024)

This resident has long hair and a long beard and refuses to cut either. [REDACTED] likes [REDACTED] nails kept long as [REDACTED] opens several cans of non-alcoholic beer a day. The community did manage to cut [REDACTED] nails down but [REDACTED] still wants them to be kept longer than usual.

Immediate: (2/24/24) [REDACTED] will add to RASP that the resident likes [REDACTED] nails, hair, and beard long.

Training: (2/23/24) Administrator trained [REDACTED] to update RASP for residents with special requests.

How trained: Inservice by Admin using the [REDACTED]

Responsible Staff: [REDACTED]

Licensee's Proposed Overall Completion Date: 02/24/2024

Implemented [REDACTED] 04/15/2024)

108 - Firearms & Weapons

2. Requirements

2600.

108. Firearms, weapons and ammunition shall be permitted on the licensed premises of a home only when the following conditions are met:

1. Firearms and weapons shall be contained in a locked cabinet located in a place other than the residents' room or in a common living area.
2. Ammunition shall be contained in a locked area separate from firearms and weapons, and located in a place other than the residents' room or in a common living area.
3. The key to the locked cabinet containing the firearms, weapons and ammunition shall be in the possession of the administrator or a designee.
4. The administrator or a designee shall be the only individual permitted to open the locked cabinet containing the firearms and weapons and the locked area containing the ammunition.
5. If a firearm, weapon or ammunition is the property of a resident, there shall be a written policy and procedures regarding the safety, access and use of firearms, weapons and ammunition. A resident may not take a firearm, weapon or ammunition out of the locked cabinet into living areas.

Description of Violation

On [REDACTED] at [REDACTED], there were unlocked, unattended knives in resident [REDACTED] room.

108 - Firearms & Weapons (continued)

Plan of Correction

Accept (█ - 03/05/2024)

Immediate: (2/23/24) All Staff were verbally trained by administrator to be aware of weapons or firearms a resident may have on them or in their room and to immediately report to a supervisor.

Training: (2/23/24) All Staff were trained by the administrator to be aware of weapons or firearms a resident may have on them or in their room and to immediately report to Administrator or █

How trained: Inservice by Admin using █

Responsible Staff: All staff

On-going: (3/7/24) Administrator will educate the residents on the home rules including the homes policy on weapons and firearms. The administrator will also continue to review home rules with all new admissions and have the new resident sign off that they have received a copy of the home rules.

Licensee's Proposed Overall Completion Date: 03/07/2024

Implemented █ - 04/15/2024)

142a - Secure Medical Care

3. Requirements

2600.

142.a. The home shall assist the resident to secure medical care if a resident's health status declines. The home shall document the resident's need for the medical care, including updating the resident's assessment and support plan.

Description of Violation

During the period after █, resident █ experienced depression and pain related to a past surgery. The home has not documented the resident's need for additional care, nor assisted in obtaining medical care, resulting in resident █ engaging in self-harm behavior on January 12, 2024.

Plan of Correction

Accept █ - 03/05/2024)

This resident has been on anxiety and pain medications since █ moved into the community in 2019. █ went on depression medication in November of 2023 and he has never mentioned any thoughts of suicide or stated that █ is depressed.

Immediate: (2/29/24) █ scheduled an in-service with Penn Medicine for 3/21/24 on Behavioral Health Training and SW consult.

Training: (3/14/24) █ will train all staff on Mental Health and Depression in addition to the regularly scheduled monthly training.

How trained: Inservice by █

Responsible Staff: All staff

On-going: (3/1/24) Med Techs/Care staff will report to █ any noticeable changes to residents behaviors, moods, physical needs, etc.

Licensee's Proposed Overall Completion Date: 03/21/2024

Implemented █ - 04/15/2024)

225c - Additional Assessment

4. Requirements

225c - Additional Assessment (continued)

2600.

225.c. The resident shall have additional assessments as follows:

1. Annually.
2. If the condition of the resident significantly changes prior to the annual assessment.
3. At the request of the Department upon cause to believe that an update is required.

Description of Violation

Resident [redacted] assessment, dated [redacted] does not include [redacted] and supervision in the home. On [redacted], resident [redacted] engaged in self-harm behavior with a knife that was accessible in the resident's room.

Plan of Correction

Accept [redacted] - 02/26/2024)

Immediate: (2/24/24) [redacted] did a new RASP for resident 2.

Training: (2/24/24) Administrator trained [redacted] on additional assessments using the [redacted]

How trained: Inservice by Administrator

Responsible Staff: [redacted]

On-going: (2/23/24) Resident Care Coordinator will audit resident files weekly using a checklist.

Licensee's Proposed Overall Completion Date: 02/25/2024

Implemented [redacted] - 04/15/2024)