

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

May 31, 2024

[REDACTED]
UMH PA CORP
[REDACTED]

RE: TUNKHANNOCK MANOR
50 WEST TIOGA STREET
TUNKHANNOCK, PA, 18657
LICENSE/COC#: 23655

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/26/2024 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: *TUNKHANNOCK MANOR* License #: *23655* License Expiration: *12/08/2024*
 Address: *50 WEST TIOGA STREET, TUNKHANNOCK, PA 18657*
 County: *WYOMING* Region: *NORTHEAST*

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: *UMH PA CORP*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-2* Date: *06/23/2015* Issued By: *L & I*
 Type: *C-2 LP* Date: *07/26/1991* Issued By: *L & I*

Staffing Hours

Resident Support Staff: *38* Total Daily Staff: *75* Waking Staff: *56*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident* Exit Conference Date: *03/26/2024*

Inspection Dates and Department Representative

03/26/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *38* Residents Served: *30*

Secured Dementia Care Unit
 In Home: *Yes* Area: *All* Capacity: *38* Residents Served: *7*

Hospice
 Current Residents: *1*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *30*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *7* Have Physical Disability: *0*

Inspections / Reviews

03/26/2024 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *04/19/2024*

04/18/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *05/01/2024*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *04/25/2024*

Inspections / Reviews *(continued)*

04/24/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/01/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 05/01/2024

05/31/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/01/2024

Reviewer: [REDACTED]

Follow-Up Type: Not Required

231e - No Objection Statement

1. Requirements

2600.

231.e. Each resident record must have documentation that the resident and the resident's designated person have not objected to the resident's admission or transfer to the secured dementia care unit.

Description of Violation

There is no documentation that Resident [REDACTED] did not object to residing in a Secured Dementia Unit.

Plan of Correction

Accept [REDACTED] - 04/24/2024)

Administrator was re-educated on 3/27/24 on Regulation 231.e. that each resident record must have documentation that the resident and the resident's designated person have not objected to the resident's admission or transfer to the secured dementia care unit. This consent was given to the resident and designated person to read and sign on 3/27/24. Administrator filed this signed consent in residents chart. All current resident files were audited by the Administrator on 3/27/24 to ensure this consent is signed by all residents and responsible persons. Administrator will be responsible for all agreements and that this specific separate consent is being signed upon move-in date and to monitor that all appropriate signatures are captured and filed in residents charts that same day of move in.

Licensee's Proposed Overall Completion Date: 04/24/2024

Implemented [REDACTED] - 05/01/2024)

234a - Admission Support Plan

2. Requirements

2600.

234.a. Within 72 hours of the admission, or within 72 hours prior to the resident's admission to the secured dementia care unit, a support plan shall be developed, implemented and documented in the resident record.

Description of Violation

Resident [REDACTED] support plan was not completed within 72 hours of admission to the Secured Dementia Unit. The Resident's admission date was [REDACTED] and the plan was completed [REDACTED].

Plan of Correction

Accept [REDACTED] - 04/24/2024)

Administrator and Nursing Supervisor were re-educated on Regulation 234.a. that within 72 hours of the admission, or within 72 hours prior to the resident's admission to the secured dementia care unit, a support plan shall be developed, implemented and documented in the resident record. This education was complete on 3/27/24. Going forward, Administrator will advise Nursing Supervisor upon move-in of residents level of care and Administrator will audit all support plans to be done in appropriate time frame for personal care or memory care. Administrator will sign off on all completed support plans to maintain an audit of compliance per appropriate dates based off move in date.

Licensee's Proposed Overall Completion Date: 04/24/2024

Implemented [REDACTED] - 05/01/2024)

234d - Support Plan Revision

3. Requirements

2600.

234.d. The support plan shall be revised at least annually and as the resident's condition changes.

Description of Violation

Resident [REDACTED] resides in the secured dementia unit. Their most recent RASP, dated [REDACTED] was not updated to include

234d - Support Plan Revision (continued)

Resident [REDACTED] recent behaviors of wandering into another resident's room and undressing on [REDACTED]

Plan of Correction

Accept [REDACTED] - 04/24/2024)

Administrator and Nursing Supervisor were re-educated on 3/27/24 on Regulation 234.d. that the support plan shall be revised at least annually and as the resident's condition changes. Resident [REDACTED] support plan was updated on 3/29/24 due to a significant change per the violation from the incident on [REDACTED]. All current residents support plans will be revised by Administrator and Nursing Supervisor by 5/8/24 to audit annual due dates and for significant changes that have occurred appropriate for an updated support plan.

Licensee's Proposed Overall Completion Date: 04/24/2024

Implemented [REDACTED] - 05/01/2024)