

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

August 19, 2026

STABON MANOR PERSONAL CARE HOME, INC.
[REDACTED]

RE: STABON MANOR PERSONAL CARE
HOME
1555 HAAK STREET
READING, PA, 19602
LICENSE/COC#: 20512

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/01/2026, 05/08/2026, 05/21/2026, 05/26/2026, 05/28/2026, 05/29/2026 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: STABON MANOR PERSONAL CARE HOME

License #: 20512

License Expiration: 04/21/2027

Address: 1555 HAAK STREET, READING, PA 19602

County: BERKS

Region: NORTHEAST

Administrator

Name:

Phone:

Email:

Legal Entity

Name: STABON MANOR PERSONAL CARE HOME, INC.

Address:

Phone:

Email:

Certificate(s) of Occupancy

Type: C-2 LP

Date: 08/18/1991

Issued By: Dept L&I

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 104

Waking Staff: 78

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Complaint, Incident

Exit Conference Date: 05/28/2026

Inspection Dates and Department Representative

05/01/2026 - On-Site:

05/08/2026 - Off-Site:

05/21/2026 - Off-Site:

05/26/2026 - On-Site:

05/28/2026 - On-Site:

05/29/2026 - Off-Site:

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 160

Residents Served: 104

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 85

Are 60 Years of Age or Older: 75

Diagnosed with Mental Illness: 66

Diagnosed with Intellectual Disability: 21

Have Mobility Need: 0

Have Physical Disability: 4

Inspections / Reviews

05/01/2026 Partial

Lead Inspector:

Follow-Up Type: POC Submission

Follow-Up Date: 06/18/2026

07/07/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 07/09/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 07/23/2026

08/19/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 07/09/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

18 Compliance With Laws

1. Requirements

2600.

18. Applicable Health and Safety Laws A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

72 P.S. § 228-A: selling of Cigarettes without a valid license.

On [REDACTED] at approximately 1:38 p.m., during an inspection conducted by an agent of the Pennsylvania Department of Revenue, the home was found to be selling cigarettes from the home's lower-level activities room without possession of a valid cigarette dealer's license.

Plan of Correction

Accept [REDACTED] - 07/07/2026)

See attached.

Licensee's Proposed Overall Completion Date: 06/17/2026

Implemented [REDACTED] - 07/31/2026)

42b Abuse

2. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [REDACTED] Resident [REDACTED] was observed crying during an interview with the licensing representative. Resident [REDACTED] stated being afraid of becoming homeless and losing their personal belongings after receiving a 30-day notice from the home directing the resident to vacate the room by [REDACTED].

Review of the home's written 30-day notice dated [REDACTED] notes that Resident [REDACTED] was instructed to "vacate your room and remove all personal possessions and medications" by [REDACTED]. The notice further stated that effective on the move-out date the facility would cease serving as the resident's representative payee and would return future payments received from Social Security.

Resident [REDACTED] stated having a scheduled medical appointment on [REDACTED] and was afraid to attend the appointment because the resident believed that upon returning to the home their personal belongings would be placed outside and they would no longer have access to their room. Resident [REDACTED] stated they feared police involvement if they remained in the home after [REDACTED].

The written 30-day notice, dated [REDACTED] identified the grounds for discharge as non-compliance with a prescribed diabetic diet, bullying of roommates and staff, and non-compliance with medication administration.

Record review failed to identify documentation supporting the allegation that Resident [REDACTED] was non-compliant with prescribed diabetic diet. Review of the home's posted menu for [REDACTED] showed breakfast consisting of cream of wheat and toast, lunch consisting of a meatball sub, potato salad, pretzels, and dessert, and supper consisting of a cheesesteak, tater tots, applesauce, and dessert. The menu did not identify diabetic alternatives or accommodations for Resident [REDACTED] prescribed diabetic diet.

42b Abuse (continued)

Record review unable to identify documentation supporting allegations that Resident [REDACTED] bullied roommates prior to issuance of the 30 day notice. Review of behavioral documentation revealed entries authored by staff person A, whom Resident [REDACTED] reported no longer trusted to administer medications following disagreements of many topics regarding resident care and accusative allegation of hitting staff person B since January 2026 until March 2026.

Review of Resident [REDACTED]'s April 2026 and May 2026 medication administration records revealed missed medications during periods when the resident was hospitalized or out of the facility. Documentation reviewed did not support the allegation that Resident [REDACTED] was generally non compliant with medication administration. Resident [REDACTED] is accepting medication administration from other medication technicians and only refused medications from staff person A with whom the resident stated there's prior conflict.

Review of Resident [REDACTED]'s medical evaluation confirmed requiring ongoing medical monitoring and care in a personal home setting. During an interview, the administrator stated that if Resident [REDACTED] did not leave the facility by 6/4/26, the owners of the home intended to pursue an eviction action through the Magisterial District Court.

The home issued a discharge notice containing allegations that were not supported by documentation reviewed during the inspection on 5/28/2026. The notice directed the resident to vacate the room, remove of all personal possessions and medications, and advised that representative payee services would cease.

As a result, Resident [REDACTED] experienced fear of homelessness, fear of losing personal property, concern regarding access to medical care, and observable emotional distress.

Repeated violation: [REDACTED]

Plan of Correction

Accept [REDACTED] - 07/07/2026)

See attached.

Licensee's Proposed Overall Completion Date: 06/17/2026

Implemented [REDACTED] - 07/31/2026)

121a - Unobstructed Egress**3. Requirements**

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

On [REDACTED] at 10:15 a.m., located nearby the beauty parlor, an oversized planter/pot for blueberries was observed blocking the lower level exit door from the outside.

121a - Unobstructed Egress (continued)

Plan of Correction

Accept [REDACTED] - 07/07/2026)

See attached.

Licensee's Proposed Overall Completion Date: 06/17/2026

Implemented [REDACTED] - 07/31/2026)

141b1 - Annual Medical Evaluation

4. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident [REDACTED]'s most recent annual medical evaluation was completed on [REDACTED].

Plan of Correction

Accept [REDACTED] - 07/07/2026)

See attached.

Licensee's Proposed Overall Completion Date: 06/17/2026

Implemented [REDACTED] 08/19/2026)

161e - Dietary Alternatives

5. Requirements

2600.

161.e. Dietary alternatives shall be available for a resident who has special health needs or religious beliefs regarding dietary restrictions.

Description of Violation

*Resident [REDACTED] has a prescribed diabetic diet. Review of the home's posted weekly menu starting from [REDACTED] - [REDACTED] revealed meals consisting of high-carbohydrate and starch-based food items, including but not limited to cream of wheat, toast, meatball sub, tater tots, cheesesteak, pasta, mashed potatoes, desserts, and juice options.**Record review, resident, and staff interview did not identify documentation of a diabetic diet plan, individualized meal accommodations, or documented substitutions to support compliance with the resident's prescribed diabetic diet. The home did not provide documentation demonstrating how the resident's prescribed diabetic diet was being implemented through meal service.**Based on review of the menu and available records, the home did not demonstrate that Resident [REDACTED] prescribed diabetic diet was being provided as ordered.*

Plan of Correction

Accept [REDACTED] - 07/07/2026)

See attached.

Licensee's Proposed Overall Completion Date: 06/17/2026

Implemented [REDACTED] - 07/31/2026)

228h - Grounds Discharge/Transfer

6. Requirements

2600.

228.h. The only grounds for discharge or transfer of a resident from a home are for the following conditions:

7. Documented, repeated violation of the home rules.

Description of Violation

On [REDACTED] the home was unable to ensure that a discharge based on documented, repeated violations of the home rules was supported by documentation.

Review of a 30-day discharge notice dated [REDACTED] issued to Resident [REDACTED] revealed that the home required the resident to vacate the home by [REDACTED]. The notice cited non-compliance with a prescribed diabetic diet, bullying of roommates and staff, and non-compliance with medication administration as the basis for discharge.

Record review was unable to identify documentation demonstrating that Resident [REDACTED] repeatedly violated home rules related to dietary compliance. The home was unable to provide documentation of specific incidents of non-compliance with the prescribed diabetic diet. Review of the home's posted menu for [REDACTED] reflected meals including cream of wheat and toast for breakfast, a meatball sub with sides and dessert for lunch, and a cheesesteak with sides and dessert for supper. No documentation of diabetic meal alternatives or individualized dietary accommodations was provided to support repeated dietary non-compliance.

Record review was unable to identify documentation of repeated incidents of bullying involving residents or staff prior to issuance of the discharge notice. The facility did not provide behavioral documentation supporting multiple occurrences of bullying behavior by Resident [REDACTED]

Review of April and May 2026 medication administration records revealed missed medications only during periods when Resident [REDACTED] was hospitalized or not present in the home. The records reviewed did not demonstrate a pattern of repeated medication non-compliance. Resident [REDACTED] reported refusal of medication only from one medication technician following a verbal conflict, while accepting medications from other staff. The home did not provide documentation supporting repeated medication non-compliance as stated in the discharge notice.

Plan of Correction

Accept [REDACTED] - 07/07/2026)

See attached.

Licensee's Proposed Overall Completion Date: 06/17/2026

Implemented [REDACTED] - 07/31/2026)