

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

June 5, 2025

[REDACTED], ADMINISTRATOR  
PLYMOUTH MANOR PERSONAL CARE CENTER LLC  
[REDACTED]  
[REDACTED]

RE: PLYMOUTH MANOR PERSONAL  
CARE CENTER  
120 MARTZ MANOR  
PLYMOUTH, PA, 18651  
LICENSE/COC#: 22587

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/06/2025 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]  
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: *PLYMOUTH MANOR PERSONAL CARE CENTER* License #: *22587* License Expiration: *03/10/2026*  
 Address: *120 MARTZ MANOR, PLYMOUTH, PA 18651*  
 County: *LUZERNE* Region: *NORTHEAST*

**Administrator**

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

**Legal Entity**

Name: *PLYMOUTH MANOR PERSONAL CARE CENTER LLC*  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *I-1* Date: *07/21/2011* Issued By: *Plymouth Borough*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *39* Waking Staff: *29*

**Inspection Information**

Type: *Full* Notice: *Unannounced* BHA Docket #:  
 Reason: *Renewal* Exit Conference Date: *05/06/2025*

**Inspection Dates and Department Representative**

*05/06/2025 - On-Site:* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *40* Residents Served: *39*

**Secured Dementia Care Unit**  
 In Home: *No* Area: Capacity: Residents Served:

**Hospice**  
 Current Residents: *1*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *5* Are 60 Years of Age or Older: *36*  
 Diagnosed with Mental Illness: *12* Diagnosed with Intellectual Disability: *1*  
 Have Mobility Need: *0* Have Physical Disability: *1*

**Inspections / Reviews**

**05/06/2025 - Full**  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *05/31/2025*

**06/02/2025 - POC Submission**  
 Submitted By: [REDACTED] Date Submitted: *06/05/2025*  
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *06/07/2025*

Inspections / Reviews *(continued)*

06/05/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/05/2025

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

101j7 - Lighting/Operable Lamp

1. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

- 7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

Room 101 bedside lamp was over 4 feet from the side of the bed.

Room 109 bedside light source was an overhead light switch that was 3.5 feet from the side of the bed.

Plan of Correction

Accept ( ) - 05/30/2025

corrected immediately 5/6/25 by PCA and Maintenance. PCA and Maintenance returned bedside lamps to original area next to bed within an arms reach for resident access for 101 and 109.

5/6/2025 Administrator spoke with each resident and resident responsible party for 101 and 109 regarding state regulation and compliance regarding bedside lamp in reach and keeping lamp in place where staff put it to be in compliance and not moving lamp to other areas. All are aware and agree to follow compliance.

Administrator will check resident bedside lamps are kept in place within residents reach

Licensee's Proposed Overall Completion Date: 05/30/2025

Implemented ( ) - 06/05/2025

105g - Lint Removal and Duct Cleaning

2. Requirements

2600.

105.g. To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

Description of Violation

At approximately 9:25a.m. a thick layer of lint was observed behind the dryer, on the dryer vent to the outside of the building, both causing a fire hazard.

Plan of Correction

Accept ( ) - 06/02/2025

corrected immediately 5/6/2025 by maintenance. Maintenance cleaned behind dryers and on top and around duct to be free and clear of any lint, dust or debris.

Monthly cleaning will be done behind dryers by maintenance and a log will be kept in laundry room and signed by maintenance monthly.

Licensee's Proposed Overall Completion Date: 05/30/2025

Implemented ( ) - 06/05/2025

183e - Storing Medications

3. Requirements

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

## 183e - Storing Medications (continued)

**Description of Violation**

At 12:15 P.M. resident #1 and #2 has a Novolog 100 unit/ml Injectable Flexpen in the home's medication cart. There was no documentation when this medication was open. According to the manufacturer's instructions Novolog Flexpen is good for 28 days after opening.

**Plan of Correction**

Accept ( [REDACTED] - 06/02/2025)

corrected immediately 5/6/2025 by PCA.

New flex pens ordered for res. 1 and res.2 by PCA

New Flex pens for res1 and res 2 dated upon opening /first use by PCA

Medication training for all PCA Med Techs provided by Administrator on 5/8/2025 on proper storage and start dates of medications. Proper signing of MARS . following med administration steps per their med training and reviewed steps , careful attention to reading and following prescribers orders , MARS and label on pharmacy meds . discrepancies --- call prescriber.

Diabetic training by certified diabetic trainer was completed on 5/2/2025 and all PCA and Med Techs certified

Charge aides will monitor flex pens daily and report any issues to Administrator immediately

Licensee's Proposed Overall Completion Date: 05/30/2025

Implemented ( [REDACTED] - 06/05/2025)

## 187d - Follow Prescriber's Orders

**4. Requirements**

2600.

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

**Description of Violation**

Resident #3 has an order to receive 8 units of Admelog Solo Injectable 100 u/ml before evening snack with no additional correction. However, the resident's medication administration record documented the resident was administered 5 units of Admelog Solo on 4/26/25 at 7:00 P.M. and 10 units of Humalog on 4/27/25 at 7:00 P.M..

**Plan of Correction**

Accept ( [REDACTED] - 06/02/2025)

5/6/2025 call to dr regarding insulin sign outs/med error 4/26/25 and 4/27/25 . No new orders,

5/6/2025 resident made aware of insulin sign outs/med error 4/26/25 and 4/27/25

5/6/2025 Call to residents responsible party and made aware of insulin sign outs/med error 4/26/25 and 4/27/25

Reportable incident sent to State 5/7/25

medication training for all PCA Med Techs provided by Administrator 5/8/2025 on proper signing of MARS , following medication training steps per their med training and reviewed steps , careful attention to reading and following prescribers orders , MARS and label on meds. discrepancies ---call prescriber

Charge PCA will monitor flex pens for start date daily and report any issues to Administrator immediately

187d - Follow Prescriber's Orders (*continued*)

Licensee's Proposed Overall Completion Date: 05/30/2025

Implemented ( [REDACTED] - 06/05/2025)