pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: July 29, 2015

Ms. Denise Bean, Executive Director
Children's Center for Treatment and Education
800 East Main Street
Bradford, Pennsylvania 16701

RE: Youngsville Residential Treatment Center
585 East Main Street
Youngsville, Pennsylvania 16371
License #423560

Dear Ms. Bean:

As a result of the Department of Human Services' licensing inspection on June 17, 2015 and June 18, 2015, of the above facility, the violations with 55 Pa.Code Ch. 3800 (relating to Child Residential and Day Treatment Facilities) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 3800 must be maintained.

Sincerely,

Brent Sutherland

Brent Sutherland
Child Residential Licensing Manager

Enclosure
Licensing Inspection Summary

VIOLATION REPORT
CHILD RESIDENTIAL LICENSING - 55 Pa.Code Chapter 3800

Facility Name: YOUNGSVILLE RESIDENTIAL TREATMENT CENTER	**License Number:** 42356
Address: 585 EAST MAIN STREET, YOUNGSVILLE, PA 16371	**County:** Warren
Director: Brian Larson	**Region:** WEST
Legal Entity Name: CHILDRENS CENTER FOR TREATMENT AND EDUCATION INC	
Legal Entity Address: 800 EAST MAIN STREET, BRADFORD, PA 16701	

Certificate(s) of Occupancy

Program Type:	**Licensed Capacity:**	**Number of Children Served:**
Residential Services	16	15

Type of Inspection: Partial	**BHA Docket Number:**	**Notice:** Unannounced

Reason(s) for Inspection(s)
Incident

On-Site Inspections Dates and Department Representatives On-Site
06/17/2015: Pugh, Bridget ; White, Anthony
06/18/2015: Pugh, Bridget ; White, Anthony

Off-Site Inspection Dates and Inspectors, if Applicable

Other Details

Partial or Full Triggers:	**Random Indicators:**

Child Demographic Data as of Inspection Dates

Age of Children:	**Number of Children who:**
0 to 5 years: 0	**Are Adjudicated Delinquent:** 4
6 to 13 years: 5	**Are Dependent:** 6
14 to 17 years: 10	**Have Mental Illness:** 0
18 to 21 years: 0	**Have an Intellectual Disability:** 0
	Have a Physical Disability: 0

Licensing Inspection Summary: 42366 - 06/17/2015 - Pugh, Bridget
Facility Name: YOUNGSVILLE RESIDENTIAL TREATMENT CENTER

1. REGULATION 55 Pa.Code §3800
3800.32(b) - A child may not be abused, mistreated, threatened, harassed or subject to corporal punishment.

2a. DESCRIPTION OF VIOLATION
On 4/12/2015 at approximately 7:30 P.M., while returning to the van from a trip to a park, Staff Member A dragged Resident #1 along a gravel pathway by one of Resident #1's arms for approximately 10 feet. Resident #1 was on his/her knees and ended up on his/her back while being dragged. As a result, on 4/13/2015 at approximately 11:04 A.M., Resident #1 was evaluated by a licensed practical nurse and the following injuries were documented, "purple bruise on left shin and red scratch on left side of back."

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The staff member identified in this situation resigned on 6/29/2015.
All staff members will be retrained on regulation 3800.32 (b) during the staff meeting on 7/29/2015. The training log will be submitted to the Bureau of Human Service Licensing following the training.

The director will implement monitoring procedures to at least include increased awareness and emphasis on compliance with Chapter 3800.32(b) during weekly child therapy sessions. BB 7/28/15

Repeat Violation: No	Date(s) of Previous Violation(s):			
Signature of Legal Entity Representative (Required on EVERY Page)	Denise Bean			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Denise Bean		Date	7-16-2015

DEPARTMENT USE ONLY - FACILITIES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 7/28/15 (Date)

The above plan of correction was approved by BB (Initials)

Plan of correction implementation status as of 7/28/15 (Date)

- ☐ Fully Implemented
- ☒ Partially Implemented - Adequate Progress
- ☐ Partially Implemented - Inadequate Progress
- ☐ Not Implemented

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JUL 16 2015
WEST REGION OFFICE

Licensing Inspection Summary: 42366 - 06/17/2015 - Pugh, Bridget
Facility Name: YOUNGSVILLE RESIDENTIAL TREATMENT CENTER

1. REGULATION 55 Pa.Code §3800
3800.203(a) - For each child for whom restrictive procedures will be used beyond unanticipated use specified in § 3800.204 (relating to unanticipated use), a restrictive procedure plan shall be written and included in the ISP specified in § 3800.226 (relating to content of the ISP), prior to use of restrictive procedures.

2a. DESCRIPTION OF VIOLATION
Manual restraints were used on Resident #1 on the following dates:

- 1/16/2015
- 2/16/2015
- 2/28/2015
- 3/2/2015
- Two times on 3/6/2015
- 3/11/2015
- Four times on 3/12/2015
- 3/15/2015
- 3/16/2015

A restrictive procedure plan was not created until 3/17/2015.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The Therapist who is responsible for developing restrictive procedures was retrained on this process and regulations 3800.203 (a) 3800.204 and 3800.226 on 6/17/2015. Please see the attached training log.
A process was initiated whereby the Program Manager and Residential Director will review the presence and appropriateness of restrictive procedures each day during the administrative debriefing. This process is was implemented on 7/13/2015.

Repeat Violation: No	Date(s) of Previous Violation(s):			

Signature of Legal Entity Representative (Required on EVERY Page) Denise Bean

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Denise Bean

Date 7-16-2015

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The above plan of correction is approved as of 7/28/15 (Date)

The above plan of correction was approved by BS (Initials)

Plan of correction implementation status as of 7/28/15 (Date)

- [X] Fully Implemented
- [ ] Partially Implemented - Adequate Progress
- [ ] Partially Implemented - Inadequate Progress
- [ ] Not Implemented

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JUL
WEST
Human Services Building

STAFF PRIVACY CODING DOCUMENT
CHILD RESIDENTIAL LICENSING - 55 Pa. Code Chapter 3800

Facility Name:YOUNGSVILLE RESIDENTIAL TREATMENT CENTER	License Number:423560

Designation	Staff Member's Name
A	[redacted]

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Human Services Licensing

Denise Bean
Printed Name and Title of Legal Entity Representative

Denise Bean
Signature of Legal Entity Representative

7-16-2015
Date

Date of Inspection: 06/17/2015

CHILD PRIVACY CODING DOCUMENT
CHILD RESIDENTIAL LICENSING - 55 Pa. Code Chapter 3800

Facility Name:YOUNGSVILLE RESIDENTIAL TREATMENT CENTER	License Number:423560

Designation	Child's Name
Resident 1	[redacted]

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JUL 16 2015
REGIONAL OFFICE

Denise Bean
Printed Name and Title of Legal Entity Representative

Denise Bean
Signature of Legal Entity Representative

7-16-2015
Date

Date of Inspection: 06/17/2015