



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: July 26, 2018

Ms. Brenda Daubner
Executive Director
Lowrie AID OPCO, LLC
100 Sterling Village Drive
Butler, Pennsylvania 16001

RE: Lowrie Place
Certificate #: 444960

Dear Ms. Daubner:

As a result of the Department's Bureau of Human Services Licensing inspection on April 16, 2018, of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) 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. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read 'Suzy Quinn', written over a white background.

Suzy Quinn
Acting Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

**VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: Lowrie Place		License Number: 44-196
Address: 100 Stirling Village Drive, Butler, PA 16001		County: Butler
Administrator: Brenda Daubner		Region: WEST
Legal Entity Name: Lowrie Aid OPCO LLC		RECEIVED JUN 27 2018
Legal Entity Address: 100 Stirling Village Drive, Butler, PA 16001		
Certificate(s) of Occupancy		WEST REGION FIELD OFFICE Human Services Licensing
C-2 LP		
10/07/1997		
Dept of L & I		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 53	Waking Staff: 40
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Incident		
On-Site Inspections Dates and Department Representatives On-Site		
04/16/2018: Garvey, Jody		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 47 Number of Residents Served: 38 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 6 Number of Hospice Residents in past year: 25		Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 38 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 15 Have a Physical Disability: 0

Violation Report: 44496 - 04/16/2018 - Garvey, Jody
PCH Name: Lowrie Place

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.15(a) - The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 - 10225.707) and 6 Pa. Code Sections 15.21 - 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

2a. DESCRIPTION OF VIOLATION

On 4/5/18 at approximately 10:00 AM, staff persons A and B were assisting resident #1 in undressing for a shower. Resident #1 who has a diagnosis of Alzheimer's disease, became agitated and verbally and physically aggressive toward staff. The resident grabbed and pinched staff person B who told the resident "Quit fucking hitting me" and allegedly told the resident to stop being a bitch. This incident was not reported to the local Area Agency on Aging until 4/6/18 at 11:30 AM.

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.

2600.15(a) Alleged resident abuse was reported late to Protective Services. Date of incident was 4/5/18 at 10 am, incident was reported on 4/6/18 at 11:30am.

Corrective Action taken:

- *Protective services was notified by the Executive Director immediately once violation was reported.
- *Staff person A was disciplined for not reporting this incident to Executive Director immediately when it occurred. Staff person B was suspended on 4/6/18 and is no longer an employee.
- *Training was held with staff on 4/17/18 by Executive Director to re-educate on abuse, and the required timeline of the Reporting of Abuse. See Attachment #1.
- *The administrator or designated staff person shall review reportable incidents at least weekly to ensure allegations of abuse are immediately reported to the local Area Agency on Aging in accordance with the OAPSA.

Twice MS 7/17/18

Repeat Violation: Yes	Date(s) of Previous Violation(s):	08/01/2017		
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Signature of Legal Entity Representative
(Required on EVERY Page) *Brenda Daubner*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) **BRENDA DAUBNER** Date *6/26/18*

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

The above plan of correction is approved as of 7/17/18
(Date)

Plan of correction implementation status as of 7/17/18
(Date)

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

- Fully Implemented
- Partially Implemented - Adequate Progress *MS*
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 44496 - 04/16/2018 - Garvey, Jody

PCH Name: Lowrie Place

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.23(a) - A home shall provide each resident with assistance with activities of daily living as indicated in the resident's assessment and support plan.

2a. DESCRIPTION OF VIOLATION

The assessment and support plan (RASP), dated 11/6/17, for resident #1, who has a diagnosis of Alzheimer's disease, indicates the resident is easily upset, can be more upset with hands on care, can be agitated at times and yell and swing at staff and has fears associated with showers. Also, the RASP indicates the resident should be approached in a calm manner. If the resident is irritable, make sure he/she is in a safe location and leave him/her alone for a while. Go back and offer services again or try a different caregiver. Provide a calm environment and notify the med tech for increased agitation.

However, on 4/5/18 at approximately 10:00 AM, resident #1 became agitated and verbally and physically aggressive toward staff persons A and B as they assisted the resident in undressing for a shower. Staff attempted to calm the resident; however, they were unsuccessful. Staff persons A and B proceeded to shower resident #1, leading to increased agitation. Resident #1 yelled and grabbed and pinched staff person B who told the resident "Quit fucking hitting me" and allegedly told the resident to stop being a bitch. Staff did not follow several care needs outlined in resident #1's RASP to include leaving the resident alone for a while and returning to provide services, providing a different caregiver and providing a calm environment.

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.

2600.23(a) Staff did not follow several care needs outlined in resident #1's RASP.

Corrective Action taken:

*Staff were re-educated by Executive Director on 4/17/18 on RASPs-(what they are, where they are kept and what they are for).

*Adult Protective Services will provide training to current staff on Tuesday, 7/17/18 on Abuse, Mandatory reporting of Abuse and Resident Rights.

*Executive Director or designee will re-educate current staff to read and follow RASPs monthly at staff meetings for the next 6 months. Education shall include sensitivity training and how to respond to difficult behaviors. Documentation of training shall be kept. MS 7/17/18

*Staff B is no longer an employee.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
(Required on EVERY Page) *Brenda Dawber*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) **BRENDA DAWBER** Date **6-26-18**

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The above plan of correction is approved as of <u>7/17/18</u> (Date)	Plan of correction implementation status as of <u>7/17/18</u> (Date)
The above plan of correction was approved by <u>MS</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress MS <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 44496 - 04/16/2018 - Garvey, Jody

PCH Name: Lowrie Place

JUN 27 2018

1. REGULATION 55 Pa.Code §2600
2600.42(c) - A resident shall be treated with dignity and respect.

WEST REGION FIELD OFFICE
Human Services Licensing

2a. DESCRIPTION OF VIOLATION

On 4/5/18 at approximately 10:00 AM, staff persons A and B were assisting resident #1 in undressing for a shower. Resident #1, who has a diagnosis of Alzheimer's disease and who has fear associated with showers, became agitated, started yelling and grabbed and pinched staff person B. This staff person became frustrated and told the resident "Quit fucking hitting me" and allegedly told the resident to stop being a bitch.

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.

2600.42(c) Resident was not treated with dignity and respect.

Corrective action taken:

*Staff member B was immediately suspended and is no longer an employee.

*Training was held with current staff on 4/17/18 by Executive Director to re-educate on abuse, resident rights and the required timeline of the Reporting of Abuse. See Attachment #1.

*Adult Protective Services will provide training to current staff on Tuesday, 7/17/18 on Abuse, Mandatory reporting of Abuse and Resident Rights.

*The ED or designee will re-educate current staff on Resident Rights at monthly staff meeting for the next 6 months.

Education shall include sensitivity training and how to respond to difficult behaviors. Documentation of training shall be kept. ms 7/17/18

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
(Required on EVERY Page) *Brenda Daubner*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *BRENDA DAUBNER* Date *6-26-18*

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