



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

SENT VIA EMAIL: [dwright@wrc.org](mailto:dwright@wrc.org)  
[pbaker@wrc.org](mailto:pbaker@wrc.org)  
[bsepich@wrc.org](mailto:bsepich@wrc.org)

MAILING DATE: December 18, 2019

Ms. Barbara Sepich  
President/CEO  
WRC Pennsylvania Memorial Home  
985 Route 28  
Brookville, Pennsylvania 15825

RE: Laurelbrooke Personal Care  
133 Laurelbrooke Drive  
Brookville, Pennsylvania 15825  
License #: 424630

Dear Ms. Sepich:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on October 31, 2019, of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read "Janine Wenzig".

Janine Wenzig  
Human Services Licensing Supervisor

Enclosure  
Licensing Inspection Summary

## Violation Report

### Facility Information

Name: LAURELBROOKE PERSONAL CARE

License Number: 42463

Address: 133 LAURELBROOKE DRIVE,, BROOKVILLE, PA 15825

County: JEFFERSON

Region: WESTERN

### Administrator

Name: Doug Wright

Phone: 8148493615

Email: dwright@wrc.org

### Legal Entity

Name: WRC PENNSYLVANIA MEMORIAL HOME

Address: 985 ROUTE 28, BROOKVILLE, PA, 15825

### Certificate(s) of Occupancy

Type: I-1

Date:

Issued By:

### Staffing Hours

Resident Support Staff:

Total Daily Staff: 74

Waking Staff: 56

### Inspection

Type: Partial

BHA Docket #:

Notice: Unannounced

Reason: Complaint

### Inspection Dates and Department Representative

10/31/2019 - On-Site: Debora McConnell

### Resident Demographic Data as of Inspection Dates

#### General Information

License Capacity: 50

Residents Served: 47

#### Secured Dementia Care Unit

In Home: Yes

Area: Harmony Circle

Capacity: 20

Residents Served: 20

#### Hospice

Current Residents: 0

#### Number of Residents Who:

Receive Supplemental Security Income: 1

Are 60 Years of Age or Older: 47

Diagnosed with Mental Illness: 31

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 27

Have Physical Disability: 2

15a - Resident Abuse Report

Regulations

2600.

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

Description of Violation

On 10/5/19, at approximately 9:30 am. resident #1 was found by staff walking down the hallway in the secured dementia care unit (SDCU) wearing a T-shirt and naked from the waist down. When the resident was escorted back to his bedroom by staff, resident #2 was found laying on resident #1's bed completely naked. The home did not report the incident to the local area agency on aging until 10/5/19, at 11:30 pm.

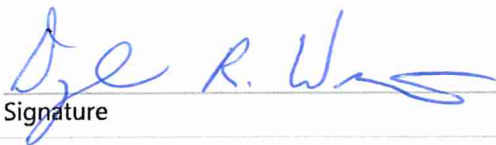
On 10/5/19, at approximately 11:40 pm, staff person A assisted resident #1 to the bathroom to assess the resident for injury after the incident of possible sexual abuse between resident #1 and #2 earlier that day. An allegation was made that staff person A performed a physical examination of resident #1, touching the resident's genital area without the resident's permission. The home did not report the allegation to the local area agency on aging.

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.)

Staff person A was retrained on the timeliness of reporting suspected abuse to the local area agency on aging. Training was provided to facility staff on 10/25/19. New staff are trained on hire on the reporting of suspected abuse of a resident. Annually staff will be trained on reporting of suspected abuse of resident.

Legal Entity Representative


  
Signature

Douglas R. Wright, interim Administrator 12/12/19  
Printed Name and Title Date

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The above plan of correction is approved as of 12/16/19 Plan of correction implementation status as of 12/16/19  
(Date) (Date)

Implemented

The above plan of correction was approved by   
(Initials)

Not Implemented

65d - Initial Direct Care Training

Regulations

2600.

65.d. Direct care staff persons hired after April 24, 2006, may not provide unsupervised ADL services until completion of the following:

- 1. Training that includes a demonstration of job duties, followed by supervised practice.
- 2. Successful completion and passing the Department-approved direct care training course and passing of the competency test.

Description of Violation

Direct care staff person B, hired 4/3/19, provided unsupervised ADL services on 10/3/19, on the 6:00 pm-10:00 pm. shift and on 10/21/19. on the 2:00 pm-8:00 pm. shift. However, the staff person did not successfully complete the Department-approved direct care training course and pass the competency test until 10/25/19.

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.)

All new hires will complete the Department approved direct care training course and pass the competency test prior to being scheduled to provide ADL services. An audit will be done on all new hires for three months by the Administrator of disignee.

Legal Entity Representative

*Douglas R. Wright*  
Signature

Douglas R. Wright, Interim Administrator 12/12/19  
Printed Name and Title Date

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The above plan of correction is approved as of 12/16/19  
(Date)

Plan of correction implementation status as of 12/16/19  
(Date)

Implemented

The above plan of correction was approved by *DWR*  
(Initials)

Not Implemented

227a - Support Plan 30 Days

Regulations

2600.

227.a. A resident requiring personal care services shall have a written support plan developed and implemented within 30 days of admission to the home. The support plan shall be documented on the Department's support plan form.

Description of Violation

Resident #1 receives home health services. The support plan for resident #1, 10/10/19, does not include the home health agency's name and contact information or the type and frequency of services provided by the home health agency.


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.)

Resident #1 no longer resides at the facility.

Instructions were reviewed with the Resident Care Coordinator on the completion of the support plan and when to revise. Leadership team meets daily to discuss residents with changes in conditions, admissions, discharges, etc. M-F. The Personal Care Home Administrator or designee will review monthly for three months.

Legal Entity Representative

  
Signature

Douglas R. Wright, Interim Administrator 12/12/19

Printed Name and Title

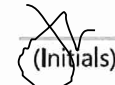
Date

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