

Department of Human Services
Bureau of Human Service Licensing

August 31, 2020

JEANNE DICKINSON, CHIEF EXECUTIVE OFFICER
SUGAR VALLEY LODGE INC
190 SUGAR VALLEY LANE
FRANKLIN, PA 16323

RE: SUGAR VALLEY LODGE (HICKORY
ACRES BUILDING)
190 SUGAR VALLEY LANE
FRANKLIN, PA, 16323
LICENSE/COC#: 44770

Dear Ms. Dickinson,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 06/26/2020 of the above facility, the citations specified on the enclosed Licensing Inspection Summary (LIS) were found.

We have determined that your plan of correction is: Acceptable

All citations specified on the plan of correction must be corrected by the dates specified on the License Inspection Summary (violation report) and continued compliance with Department statutes and regulations must be maintained.

Sincerely,
Suzy Quinn

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY**

Facility Information

Name: *SUGAR VALLEY LODGE (HICKORY ACRES BUILDING)* License #: *44770* License Expiration Date: *08/10/2021*
 Address: *190 SUGAR VALLEY LANE, FRANKLIN, PA 16323*
 County: *VENANGO* Region: *WESTERN*

Administrator

Name: *Jeanne Dickinson* Phone: *8143460352* Email: *jeanne@sugarvalleylodge.com*

Legal Entity

Name: *SUGAR VALLEY LODGE INC*
 Address: *190 SUGAR VALLEY LANE, FRANKLIN, PA, 16323*
 Phone: *8143460352* Email: *JEANNE@SUGARVALLEYLODGE.COM*

Certificate(s) of Occupancy

Type: *I-1* Date: *05/20/2016* Issued By: *Sugarcreek Borough*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *25* Waking Staff: *19*

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Complaint,Incident* Exit Conference Date: *07/08/2020*

Inspection Dates and Department Representative

06/26/2020 - On-Site: Lori Gillette

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *27* Residents Served: *25*

Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *21* Are 60 Years of Age or Older: *15*
 Diagnosed with Mental Illness: *15* Diagnosed with Intellectual Disability: *1*
 Have Mobility Need: *0* Have Physical Disability: *1*

Inspections / Reviews

06/26/2020 - Partial

Lead Inspector: *Lori Gillette* Follow-Up Type: *POC Submission* Follow-Up Date: *08/10/2020*

Inspections / Reviews *(continued)*

8/21/2020 - POC Submission

Lead Reviewer: *Suzy Quinn*Follow-Up Type: *POC Submission*Follow-Up Date: *08/26/2020*

8/31/2020 - POC Submission

Lead Reviewer: *Suzy Quinn*Follow-Up Type: *Document Submission*Follow-Up Date: *09/10/2020*

15a - Resident Abuse Report

1. Requirements

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 6/23/2020, resident #1 called the home from the hospital and reported to staff persons A and B that staff person C yelled at and humiliated her on the morning of 6/21/2020. Resident #1 also told staff persons A and B that staff person C knew she was sick yet failed to check on her at all throughout the day. On 6/21/2020 at approximately 4:45 pm, staff person E checked on resident #1, found she had a high temperature and sent her to the emergency room, and she was admitted to the hospital. This allegation of abuse was not reported to the Department until 6/26/2020.

Plan of Correction

Accept

all staff involved were immediately spoken too following the incident by COO regarding the reporting requirements and policy and procedure for reporting suspected abuse. on august 19th 2020 all PCA staff and Administration will be in-serviced "via" zoom by Act of Aging Crawford County. The in-service will include older adult protective services, act 13 and abuse/neglect reporting requirements, as well as the facility's policy and procedure for reporting unusual incidents and also resident rights. new hires will be in-serviced on the above mentioned, all staff will be reminded of the importance of reporting unusual incidents on a timely manner at our quality management meetings twice a year and administration will continue to monitor for compliance. staff person C was terminated on 07/09/2020

Completion Date: 08/04/2020

16c - Written Incident Report

1. Requirements

2600.

- 16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On 6/21/2020, at approximately 10:00 am staff person D observed staff person C and resident #2 engaged in an argument. Staff person D indicated it was so loud she could hear the yelling down the hallway. Staff person D reported this incident to staff person A and B on 6/23/2020; however, the home did not report this incident to the Department.

Plan of Correction

Accept

Administration will ensure that all reportable incidents are documented and reported in a timely manner, administrator will ensure that staff know how to report incidents 24 hours a day 7 days a week and on holidays. Staff in- service is scheduled for August 19th 2020 "via" zoom by Act of Aging Crawford County. The in-service will include older adult protective services, act 13 and abuse/neglect reporting requirements, as well as the facility's policy and procedure for reporting unusual incidents and also resident rights. Staff person C was terminated effective 07/09/2020

Completion Date: 08/04/2020

42c - Treatment of Residents

1. Requirements

2600.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

On 6/21/2020 at approximately 6:00 am, staff person C yelled at and argued with resident #1 about providing the resident her PRN medication. Resident #1 states she felt humiliated by staff person C.

On 6/21/2020 at approximately 10:00 am, staff person D observed staff person C and resident #2 engaged in an argument. Staff person D indicated it was so loud she could hear the yelling down the hallway.

Plan of Correction

Do Not Accept

Staff person was terminated on 07/09/2020, staff person C was not permitted to have contact with resident #1 or resident #2 futhermore is not permitted back on Sugar Valley lodge property. in-service for remaining staff is scheduled for August 19th 2020 Act of Aging Crawford County will do the in - service "via" zoom, on resident rights. Administrator will continue with yearly training with resident rights in addition to new hires and will continue to monitor interactions between staff and residents. any incidents will be reported immediately to licensing

Completion Date: 08/04/2020

Plan of Correction

Accept

Staff person was terminated on 07/09/2020, staff person C was not permitted to have contact with resident #1 or resident #2 futhermore is not permitted back on Sugar Valley lodge property. in-service for remaining staff is scheduled for August 19th 2020 Act of Aging Crawford County will do the in - service "via" zoom, on resident rights. Administrator will continue with yearly training with resident rights in addition to new hires and will continue to monitor interactions between staff and residents. any incidents will be reported immediately to licensing. Beginning September 1st 2020 administration will interview privately two residents a week for one month and then two residents monthly thereafter to discuss any concerns they may have.

Completion Date: 08/26/2020

187c - Refusal of Medication

1. Requirements

2600.

187.c. If a resident refuses to take a prescribed medication, the refusal shall be documented in the resident's record and on the medication record. The refusal shall be reported to the prescriber within 24 hours, unless otherwise instructed by the prescriber. Subsequent refusals to take a prescribed medication shall be reported as required by the prescriber.

Description of Violation

Resident #1 is prescribed Acetaminophen, 500mg, take 2 tablets by mouth 3 times a day as needed for pain or headache. On 6/21/2020 at 4:50 pm, staff person E observed staff person C offer this medication to the resident. The resident refused the medication; however, staff person C logged this medication as administered and effective in resident #1's June 2020 medication administration record.

187c - Refusal of Medication (continued)

Plan of Correction**Do Not Accept**

Staff person C was terminated as of 07/09/2020. Director of Nursing will speak to staff at August 19th 2020 meeting on the proper way of handling medications and Sugar Valley Lodges policy and procedure on refusal of medication they will also go over falsification of documents which would result in immediate termination. Director of Nursing will monitor MAR'S weekly.

Completion Date: 08/04/2020

Plan of Correction**Accept**

Staff person C was terminated as of 07/09/2020. Director of Nursing will speak to staff at August 19th 2020 meeting on the proper way of handling medications and Sugar Valley Lodges policy and procedure on refusal of medication they will also go over falsification of documents which would result in immediate termination. Director of Nursing will monitor MAR'S weekly. Beginning Sept 1st 2020 Director of nursing will also observe two staff members weekly for one month conducting med passes to insure refusals are being handled correctly and then two staff members monthly thereafter.

Completion Date: 08/26/2020