

Department of Human Services
Bureau of Human Service Licensing

February 9, 2021

[REDACTED], OWNER
INSINGER'S PERSONAL CARE HOME INC
2075 MEADOW LANE
MONTOURSVILLE, PA 17754

RE: INSINGER'S BOARDING HOME
673 CAMPBELL STREET
WILLIAMSPORT, PA, 17701
LICENSE/COC#: 20210

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/03/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Michele Moskalczyk
Human Services Licensing Supervisor

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: *INSINGER'S BOARDING HOME* **License #:** *20210* **License Expiration Date:** *11/24/2021*
Address: *673 CAMPBELL STREET, WILLIAMSPORT, PA 17701*
County: *LYCOMING* **Region:** *NORTHEAST*

Administrator

Name: [REDACTED] **Phone:** *5703222649* **Email:** [REDACTED]

Legal Entity

Name: *INSINGER'S PERSONAL CARE HOME INC*
Address: *2075 MEADOW LANE, MONTOURSVILLE, PA, 17754*
Phone: *5703222597* **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* **Date:** *03/05/1985* **Issued By:** *L&I*

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff:** *17* **Waking Staff:** *13*

Inspection

Type: *Partial* **Notice:** *Unannounced* **BHA Docket #:**
Reason: *Complaint, Incident* **Exit Conference Date:** *12/03/2020*

Inspection Dates and Department Representative

12/03/2020 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *20* **Residents Served:** *17*

Secured Dementia Care Unit

| | | | |
|---------------------------|--------------|------------------|--------------------------|
| In Home: <i>No</i> | Area: | Capacity: | Residents Served: |
|---------------------------|--------------|------------------|--------------------------|

Hospice

Current Residents: *0*

Number of Residents Who:

| | |
|--|---|
| Receive Supplemental Security Income: <i>16</i> | Are 60 Years of Age or Older: <i>17</i> |
| Diagnosed with Mental Illness: <i>12</i> | Diagnosed with Intellectual Disability: <i>6</i> |
| Have Mobility Need: <i>0</i> | Have Physical Disability: <i>0</i> |

Inspections / Reviews

12/03/2020 - Partial

Lead Inspector: [REDACTED]

Follow Up Type: *POC Submission*Follow-Up Date: *12/18/2020*

12/11/2020 POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *12/31/2020*

2/9/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

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 [REDACTED], at 4:00am Resident 1 went to UPMC emergency room and made allegations of sexual assault. This incident was reported to staff person A on 11/21/20 at 5:00pm.. However, the home did not notify the local area agency on aging of the alleged sexual assault.

Plan of Correction

Accept

f there is an allegation of abuse by a staff person the home shall immediately report suspected abuse of a resident to the Area on Aging of the alleged sexual assault.

This will be the administrators duty to report this abuse in accordance with the Older Adults Protective Services Act and comply with the requirements regarding restrictions on staff.

Area Agency on Aging was notified of this alleged abuse on 12/3/2020. The administrator spoke with Traci Foster. Reporting will ensure that abuse or suspected abuse is appropriately reported and investigated.

Completion Date: 12/03/2020

Update - 12/11/2020

Within 20 days of receipt of this plan of correction:

All staff, including the administrator, will receive training in abuse reporting and prevention. In the future, the administrator will ensure that all suspected abuse is reported in accordance with the Older Adults Protective Services Act.

Please send/attach proof of training.

Document Submission

Implemented

See training attachment

15b - Supervisor Plan

1. Requirements

2600.

- 15.b. If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

Description of Violation

On 11/21/20, Resident 1 made the home aware of alleged sexual assault perpetrated by Staff person A. The home did not provide a supervisory action or suspend Staff person A while the allegations were investigated.

Plan of Correction

Accept

The administrator in the case of alleged resident abuse by a staff person shall implement supervisory action or suspend the staff person while allegations are being investigated.

Future reported abuse allegations will put the staff person on suspension until alleged allegations are investigated.

Proper action ensures that abuse or suspected abuse is appropriately reported and investigated.

Completion Date: 12/09/2020

15b - Supervisor Plan *(continued)***Update - 12/11/2020***Immediately and Ongoing:**If any future allegations of abuse occur, the home will immediately take the following steps:*

- 1. Suspend the staff person or persons involved*
- 2. Report the alleged abuse to the Department*
- 3. Report the alleged abuse to the local Area Agency on Aging*
- 4. Report the alleged abuse to the resident's designated person, if any.*

Document Submission**Implemented***Completed*

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 11/21/20, Resident 1 made allegations of sexual assault by Staff person A at 5:00PM. The home did not report this incident to the department until 12/3/20

Plan of Correction**Accept**

The administrator shall report an incident or condition within 24 hours to the personal care homes regional DHS office.

The incident report should be as detailed as possible in order to provide as much possible to DHS and those nvestigation the report.

An incident report was sent to DHS on 12/3/2020

Reporting incidents allows the Department to respond promptly to serious situations, and offers homes the opportunity to provide information that may reduce the need for the Department to pursue additional information.

Completion Date: *12/03/2020*

Update - 12/11/2020

Within 20 days of receipt of this plan of correction:

The administrator will review the incidents required to be reported by 2600.16a with all staff. All future incidents will be reported as required.

Document Submission**Implemented***See attached training*

227c - Support Plan Revision

1. Requirements

2600.

- 227.c. The support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment.

Description of Violation

Resident #1 support plan dated 1/18/2020, did not address the Residents needs for additional supervision due to recurring allegations of sexual assault.

227c - Support Plan Revision (*continued*)**Plan of Correction****Accept**

The administrator will make sure that a revised support plan is completed within 30 days of the annual assessment or upon changes in the residents needs as indicated on the current assessment.

A new support plan was completed by the administrator on 12/3/2020.

Keeping the support plan current and updated will ensure that each residents needs are being met as those needs change, and that accountability for meeting those needs is firmly established.

Completion Date 12/03/2020

Update 12/11/2020

Immediately and Ongoing:

The administrator will develop a system to ensure that all support plans are done correctly, completely, and within the time frames required by this Chapter.

Document Submission**Implemented**

Completed