

Department of Human Services  
Bureau of Human Service Licensing

January 27, 2021

[REDACTED], COO  
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 [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/22/2020, 12/23/2020, 12/28/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Janine Wenzig

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services  
Bureau of Human Service Licensing

January 25, 2021

[REDACTED], COO  
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 [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 12/22/2020, 12/23/2020, 12/28/2020 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,  
Janine Wenzig

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: [REDACTED] Phone: *8143460352* Email: [REDACTED]

**Legal Entity**

Name: *SUGAR VALLEY LODGE INC*  
Address: *190 SUGAR VALLEY LANE, FRANKLIN, PA, 16323*  
Phone: *8143460352* Email: [REDACTED]

**Certificate(s) of Occupancy**

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

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *27* Waking Staff: *20*

**Inspection**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Incident* Exit Conference Date: *12/28/2020*

**Inspection Dates and Department Representative**

*12/22/2020 - Off-Site:* [REDACTED]  
*12/23/2020 - Off-Site:* [REDACTED]  
*12/28/2020 - Off-Site:* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

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

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *0*

**Number of Residents Who:**

Receive Supplemental Security Income: *25* Are 60 Years of Age or Older: *18*  
Diagnosed with Mental Illness: *18* Diagnosed with Intellectual Disability: *1*  
Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

12/22/2020 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *01/25/2021*

1/25/2021 - POC Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *01/29/2021*

1/27/2021 - 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 12/13/2020, at approximately 2:15 p.m., staff person A was overheard telling resident #1 "You need to wear a mask, this is stupid to be reminded." This incident was observed by staff person B and was reported to [REDACTED] staff person C on 12/13/2020, at approximately 2:30 p.m. However, this allegation of abuse was not reported to the Area Agency on Aging until 12/15/2020, at 2:20 p.m.

On 12/13/2020, at approximately 2:35 p.m., staff person A was overheard telling resident #2 in a rude and harsh manner "Move! You're in my way!" This incident was observed by staff person B. However, this allegation of abuse was not reported to Area Agency on Aging until 12/15/2020, at 2:20 p.m.

Repeat Violation-6/26/2020

**Plan of Correction**

Accept

ADMINISTRATION AND STAFF WILL REVIEW REGULATION 2600.15A AND COMPLETE TRAINING "VIA" ZOOM, DATE AND TIME ARE NOT YET KNOWN BUT EVERY INDICATION IS THAT THE TRAINING WILL TAKE PLACE IN FEBRUARY 2020 DUE TO ONE PARTY HAVING COVID-19. VENANGO COUNTY AREA ON AGING AND ACT OF AGING OF CRAWFORD COUNTY WILL CONDUCT THE TRAINING. ADMINISTRATION AND DESIGNATED PERSONS WILL BE RESPONSIBLE FOR INSURING THE COMPLETION AND REPORTING OF ALL INCIDENTS IMMEDIATELY OF OCCURRENCE. THE ABOVE MENTIONED WILL BE MONITORED IN OUR QUALITY MANAGEMENT MEETINGS TWICE A YEAR AND AS NEEDED. STAFF PERSON A WAS TERMINATED

Completion Date: 01/21/2021

15a - Resident Abuse Report (*continued*)**Document Submission****Implemented***already submitted and accepted*

## 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 12/13/2020, at approximately 2:15 p.m., staff person A was overheard telling resident #1 "You need to wear a mask, this is stupid to be reminded." This incident was observed by staff person B and was reported to [REDACTED] staff person C on 12/13/2020, at approximately 2:30 p.m.

On 12/13/2020, at approximately 2:35 p.m., staff person A was overheard telling resident #2 in a rude and harsh manner "Move! You're in my way!"

Staff person A continued to work the remainder of the shift until 6:00 p.m. on 12/13/2020. The home did not immediately develop and implement a plan of supervision or suspend the staff person involved in the incident. Staff person A was terminated from employment on [REDACTED]

**Plan of Correction****Accept**

STAFF PERSON A IS NO LONGER EMPLOYED WITH SUGAR VALLEY LODGE. WITH AN SUSPECTED ALLEGATION OF ABUSE THE IDENTIFIED STAFF PERSON WILL BE SUSPENDED IMMEDIATELY UNTIL INVESTIGATION IS COMPLETE. ADMINISTRATION WILL IMMEDIATELY IMPLEMENT PROCEDURES THAT ENSURE REPORTING OF ALLEGATIONS OF ABUSE BY STAFF PERSON AND WILL DEVELOPE AND IMPLEMENT A PLAN FOR SUPERVISION OR SUSPENSION OF PERSON INVOLVED IN ALLEDGED INCIDENT.

**Completion Date:** 01/21/2021

**Document Submission****Implemented***already submitted and accepted*

## 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).

16c - Written Incident Report (continued)

**Description of Violation**

On 12/13/2020, at approximately 2:15 p.m., staff person A was overheard telling resident #1 "You need to wear a mask, this is stupid to be reminded." This incident was observed by staff person B and was reported to [REDACTED] [REDACTED] staff person C on 12/13/2020, at approximately 2:30 p.m. The home did not report this incident to the Department until 12/15/2020, at 3:30 p.m.

On 12/13/2020, at approximately 2:35 p.m., staff person A was overheard telling resident #2 in a rude and harsh manner "Move! You're in my way!" The home did not report this incident to the Department until 12/15/2020, at 3:30 p.m.

Repeat Violation - 6/26/2020

**Plan of Correction**

Accept

CURRENT STAFF WILL RECEIVE TRAINING 'VIA' ZOOM DATE UNKNOWN AT THIS TIME BUT EVERY INDICATION IS IT WILL BE HELD IN FEBRUARY 2021 DUE TO PERSON HAVING COVID-19. VENANGO COUNTY AREA ON AGING AND ACT OF AGING CRAWFORD COUNTY WILL CONDUCT THE TRAINING. STAFF WILL BE INSTRUCTED ON THE VARIOUS TYPES OF ABUSE AND WILL BE INSTRUCTED TO REPORT ABUSE TO THE DESIGNATED PERSONS INTERNALLY. DESIGNATED PERSONS WILL REPORT ABUSE IMMEDIATELY TO DHS, OLDER ADULT PROTECTIVE SERVICES AND FOLLOW UP WITH A PHONE CALL TO ENSURE PAPERWORK WAS RECEIVED. DESIGNATED PERSON WILL IMMEDIATELY CONDUCT AN INTERNAL INVESTIGATION. ANY STAFF MEMBER INVOLVED WILL BE SUSPENDED IMMEDIATELY UNTIL INVESTIGATIONS ARE COMPLETE. STAFF PERSON A WAS TERMINATED.

Completion Date: 01/21/2021

**Document Submission**

Implemented

already submitted and accepted

42c - Treatment of Residents

**1. Requirements**

2600.

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

42c - Treatment of Residents (continued)

**Description of Violation**

On 12/13/2020, at approximately 2:15 p.m., staff person A was overheard telling resident #1 "You need to wear a mask, this is stupid to be reminded."

On 12/13/2020, at approximately 2:15 p.m., staff person A told resident #2, in a rude and harsh manner, "Move! You're in my way." Resident #2 responded "Sorry" and moved. Resident #2 indicated that staff person A's behavior upset [redacted] and made [redacted] feel that [redacted] was a bad person.

Staff person A was terminated from employment on [redacted].

Repeat Violation-8/11/2020 et al, 6/26/2020, 7/8/19 et al,

**Plan of Correction**

**Accept**

CURRENT STAFF WILL RECEIVE TRAINING 'VIA' ZOOM DATE UNKNOWN AT THIS TIME BUT EVERY INDICATION IS IT WILL BE HELD IN FEBRUARY 2021 DUE TO PERSON HAVING COVID-19. VENANGO COUNTY AREA ON AGING AND ACT OF AGING CRAWFORD COUNTY WILL CONDUCT THE TRAINING. TOPICS WILL INCLUDE RESIDENT RIGHTS AND VARIOUS TYPES OF ABUSE. ADMINISTRATION WILL CONTINUE WITH YEARLY TRAININGS ON ABOVE MENTIONED TOPICS AND AS NEEDED. ALL NEW HIRES WILL RECEIVE TRAININGS THE FIRST DAY OF ORIENTATION. ADMINISTRATION WILL CONTINUE TO MONITOR INTERACTIONS BETWEEN STAFF AND RESIDENTS, INCIDENTS WILL BE REPORTED IMMEDIATELY TO LICENSING. ON SEPT 1ST 2020 ADMINISTRATION IMPLEMENTED A PLAN TO INTERVIEW TWO RESIDENTS A MONTH TO DISCUSS ANY ISSUES OR CONCERNS THEY MAY HAVE AND WILL CONTINUE TO DO SO. STAFF PERSON A WAS TERMINATED.

Completion Date: 01/21/2021

**Document Submission**

**Implemented**

already submitted and accepted