

Department of Human Services  
Bureau of Human Service Licensing

April 26, 2022

[REDACTED]  
LOWRIE AID OPCO LLC  
[REDACTED]  
[REDACTED]

RE: LOWRIE PLACE  
100 STERLING VILLAGE DRIVE  
BUTLER, PA, 16001  
LICENSE/COC#: 44496

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/05/2022, 01/06/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Amy Duncan

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services  
Bureau of Human Service Licensing

February 15, 2022

[REDACTED]  
LOWRIE AID OPCO LLC  
[REDACTED]  
[REDACTED]

RE: LOWRIE PLACE  
100 STERLING VILLAGE DRIVE  
BUTLER, PA, 16001  
LICENSE/COC#: 44496

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 01/05/2022, 01/06/2022 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,  
Amy Duncan

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

**Facility Information**

Name: *LOWRIE PLACE* License #: *44496* License Expiration: *04/18/2023*  
Address: *100 STERLING VILLAGE DRIVE, BUTLER, PA 16001*  
County: *BUTLER* Region: *WESTERN*

**Administrator**

Name: [REDACTED] Phone: *7242872171* Email: [REDACTED]

**Legal Entity**

Name: *LOWRIE AID OPCO LLC*  
Address: *330 NORTH WABASH, SUITE 3700, CHICAGO, IL, 60611*  
Phone: *7242872171* Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *10/07/1997* Issued By: *Dept. L & I*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *32* Waking Staff: *24*

**Inspection Information**

Type: *Full* Notice: *Unannounced* BHA Docket #:  
Reason: *Renewal* Exit Conference Date: *01/06/2022*

**Inspection Dates and Department Representative**

*01/05/2022 - On-Site:* [REDACTED]  
*01/06/2022 - On-Site:* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *47* Residents Served: *28*

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *4*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *28*  
Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *4* Have Physical Disability: *1*

**Inspections / Reviews**

**01/05/2022 - Full**

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *02/05/2022*

Inspections / Reviews (*continued*)

02/15/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: *03/15/2022*

04/26/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

82a - Poisonous Materials

1. Requirements

2600.

82.a. Poisonous materials shall be stored in their original, labeled containers.

Description of Violation

On 1/5/22 at 10:30 a.m., there were (10) 550ml clear spray bottles in the housekeeping storage room, labeled by staff in permanent marker, as follows:

- (6) bottles containing a yellow liquid, labeled 'peroxide cleaner' and identified by staff to be Peroxide Multi Surface Cleaner and Disinfectant
- (4) bottles containing a white liquid, labeled Oda-Ban

The original product labeling indicates, contact poison control if swallowed.

Plan of Correction

Accept

Plan of Correction

1. The cleaning products were discarded from the spray bottles on 01/05/2022 by maintenance Tech. Product manufacturer's labels were ordered from the supply company on 01/06/2022 by Admin Specialist. (See Attached Container Packing List)
2. An audit was conducted on 01/06/2022 by ED to ensure that all poisonous materials are stored in product manufacturer's labeled containers with no additional findings. (See attached completed audit)
3. Current Staff will be educated by ED on Regulation 82.a Poisonous materials shall be stored in their original product manufacturer's labeled containers by 01/24/2022. (See attached staff education)
3. Administrator or designee will audit weekly for 4 weeks, biweekly for 4 weeks, and then monthly for one month to ensure proper labeling of spray bottles with manufacturer's labels. Audits will be reviewed at monthly QI meetings. Continued review will be based on 3 months of sustained compliance.

Plan of Correction

Disclaimer Statement

Submission of this response and Plan of Correction is NOT a legal admission that a deficiency exists or that this Statement of Deficiencies was correctly cite, and is also NOT to be construed as an admission against interest by the residence, or any employee, agents, or other individuals who drafted or may be discussed in the response or Plan of Corrections. In addition, preparation and submission of the Plan of Correction does NOT constitute an admission of agreement of any kind by the facility of the truth of any facts alleged or the correctness of any conclusions set forth in the allegation by the survey agency.

Completion Date: 01/31/2022

Document Submission

Implemented

Staff Education, packing list for labels, and audit tracker