Department of Human Services
Office of Children, Youth and Families
Licensing Inspection Summary - Public
55 PA.CODE CHAPTER 3800

January 24, 2024

[redacted]
BCL PARTNERS LLC
[redacted]

RE: LEADING YOUTH FOR EXCELLENCE (LYFE)
911 GIBSON BOULEVARD
STEELTON, PA, 17113
LICENSE/COC#: 33817

[redacted],

As a result of the Pennsylvania Department of Human Services, Office of Children, Youth and Families review on of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[redacted]

cc: Pennsylvania Office of Children, Youth and Families

Agency/Facility Information

Name: *LEADING YOUTH FOR EXCELLENCE (LYFE)*
Address: *911 GIBSON BOULEVARD, STEELTON, PA 17113*
County: *DAUPHIN*
License Number: *33817*
License Expiration: *06/06/2024*

Administrator

Name: [redacted] **Phone:** [redacted] **Email:** [redacted]

Legal Entity

Name: *BCL PARTNERS LLC*
Address: [redacted]
Phone: [redacted] **Email:** [redacted]

Inspection Information

Start Date: *06/15/2023* **End Date:** *08/23/2023* **Type:** *Complaint* **Notice:** *Announced Visit*
Inspector(s): [redacted]

Inspection Narrative

The Department of Human Services conducted an investigation of Herbert Schaffner Youth Center (LYFE) from 06/15/2023-08/23/2023. The following areas of non-compliance were noted:

Inspections / Reviews

06/15/2023 - Complaint

Lead Inspector: [redacted] **Follow-Up Type:** *POC Submission* **Follow-Up Date:** *09/15/2023*

10/11/2023 - POC Submission

Submitted By: [redacted] **Date Submitted:** *10/19/2023*
Reviewer: [redacted] **Follow-Up Type:** *POC Submission* **Follow-Up Date:** *10/18/2023*

11/01/2023 - POC Submission

Reviewer: [redacted] **Follow-Up Type:** *On-site Verification* **Follow-Up Date:** *12/01/2023*

11/01/2023 - On-site Verification

Submitted By: [redacted] **Date Submitted:** *10/19/2023*
Reviewer: [redacted] **Follow-Up Type:** *Not Required*

3800.16 Reportable Incidents

1. Requirements

3800.16.a. A reportable incident is the following:
5. A violation of a child's rights.

Description of Violation

An incident occurred on [redacted]. A HCSIS report was not completed within 24 hours of the incident.

Plan of Correction ***Accept [redacted] - 10/31/2023)***

The reportable incidents policy, which addresses the requirements for filing a HCSIS report, will be re-circulated and reviewed with all supervisors at the next weekly supervisors meeting on October 24, 2023. A copy of the policy is attached. Supervisors will be reminded that such incidents must be reported immediately to appropriate staff and directors for HCSIS review and processing. Supervisors will execute a verification affirming that received, reviewed, and understand the policy. A copy of the verification is attached and shall serve as documentation that staff reviewed and understood the policy. HCSIS reporting duties have been reassigned to another member of the staff, who shall be part of the supervisory reporting chain and ensure timely HCSIS filing. The Compliance Officer shall be responsible for monitoring implementation of this Plan of Correction and ensuring regulatory compliance.*

**The facility operates 24 hours a day on a three shift rotation M-F and two shift rotation Sat-Sun. Each shift is headed by a lead supervisor. Those are the individuals who comprise the supervisory team.*

Licensee's Proposed Overall Completion Date: *10/24/2023*

On-site Verification ***Implemented [redacted] - 12/05/2023)***

This POC was implemented/verified on 12/5/2023. [redacted]

3800.32 Specific Rights

2. Requirements

3800.32.c. A child has the right to be treated with fairness, dignity and respect.

Description of Violation

On [redacted], Child A was not treated with fairness, dignity and respect by Staff Member A. Surveillance footage showed Child A was carried in an unapproved restraint causing Child A to fall out of [redacted] clothing. Child A was additionally shoved into a wall by Staff Member A.

Plan of Correction ***Accept [redacted] - 10/09/2023)***

Staff Member A was referred for additional SCM and De-Escalation training, which was completed on July 25, 2023, and has had no issues since this incident. A memorandum to Staff Member A confirming this referral was sent to [redacted] on [redacted]. [redacted] is required to participate in weekly SCM and De-Escalation trainings. The Compliance Officer shall be responsible for monitoring implementation of this Plan of Correction and ensuring regulatory compliance.

Licensee's Proposed Overall Completion Date: *09/18/2023*

On-site Verification ***Implemented [redacted] - 12/05/2023)***

This POC was implemented/verified on 12/5/2023. [redacted]

3800.202 Appropriate Use of Restrictive Procedures

3. Requirements

3800.202.a. A restrictive procedure may not be used in a punitive manner, for the convenience of staff persons or

3800.202 Appropriate Use of Restrictive Procedures *(continued)*

as a program substitution.

Description of Violation

On [redacted], Child A was placed in a restrictive procedure that was used in a punitive manner, for the convenience of staff persons or as a program substitution. Surveillance footage showed Child A was carried by [redacted] limbs from one Activity Pod to another Pod. Child A was not being aggressive towards [redacted] or others.

Plan of Correction ***Accept [redacted] - 10/09/2023)***

The Agency has scheduled a staff meeting for [redacted], at which time all staff will be reminded that restrictive procedures are only to be employed only when students present a risk of harm to or otherwise become aggressive towards themselves or others. Staff will be required to attend at least one (1) SCM refresher training per month at the facility. The Compliance Officer shall be responsible for monitoring implementation of this Plan of Correction and ensuring regulatory compliance.

Licensee's Proposed Overall Completion Date: *09/20/2023*

On-site Verification ***Implemented [redacted] - 12/05/2023)***

This POC was implemented/verified on 12/5/2023. [redacted]

4. Requirements

3800.202.b. With the exception of exclusion as specified in § 3800.212 (relating to exclusion), a restrictive procedure may be used only to prevent a child from injuring himself or others.

Description of Violation

Child A was subject to a restrictive procedure that was being utilized for reasons other than to prevent a child from injuring [redacted] or others.

Plan of Correction ***Accept [redacted] - 10/09/2023)***

The Agency has scheduled a staff meeting for September 20, 2023, at which time all staff will be reminded that restrictive procedures are only to be employed only when students present a risk of harm to or otherwise become aggressive towards themselves or others. Staff will be required to attend at least one (1) SCM refresher training per month at the facility. The Compliance Officer shall be responsible for monitoring implementation of this Plan of Correction and ensuring regulatory compliance.

Licensee's Proposed Overall Completion Date: *09/20/2023*

On-site Verification ***Implemented [redacted] - 12/05/2023)***

This POC was implemented/verified on 12/5/2023. [redacted]

5. Requirements

3800.202. Appropriate use of restrictive procedures.

c. For each incident in which use of a restrictive procedure is considered:

1. Every attempt shall be made to anticipate and de-escalate the behavior using methods of intervention less intrusive than restrictive procedures.

Description of Violation

Child A was subject to a restrictive procedure on [redacted] without evidence of attempts being made to anticipate and de-escalate the behavior and using methods of intervention less intrusive than restrictive procedures.

Plan of Correction ***Accept [redacted] - 10/09/2023)***

The Agency has scheduled a staff meeting for [redacted], at which time all staff will be reminded that restrictive procedures are only to be employed only when students present a risk of harm to or otherwise become aggressive towards themselves or others. Staff will be required to attend at least one (1) De-Escalation refresher training per month at the facility. The Compliance Officer shall be responsible for monitoring implementation of

3800.202 Appropriate Use of Restrictive Procedures (continued)

this Plan of Correction and ensuring regulatory compliance.

Licensee's Proposed Overall Completion Date: *09/20/2023*

On-site Verification ***Implemented [redacted] - 12/05/2023)***

This POC was implemented/verified on 12/5/2023. [redacted]

6. Requirements

3800.202. Appropriate use of restrictive procedures.

c. For each incident in which use of a restrictive procedure is considered:

2. A restrictive procedure may not be used unless less intrusive techniques and resources appropriate to the behavior have been tried but have failed.

Description of Violation

Child A was subject to a restrictive procedure on [redacted] *without evidence that less intrusive techniques and resources appropriate to the behavior had been tried but have failed.*

Plan of Correction ***Accept [redacted] - 10/09/2023)***

The Agency has scheduled a staff meeting for September 20, 2023, at which time all staff will be reminded that restrictive procedures are only to be employed only when students present a risk of harm to or otherwise become aggressive towards themselves or others. Staff will be required to attend at least one (1) De-Escalation refresher training per month at the facility. The Compliance Officer shall be responsible for monitoring implementation of this Plan of Correction and ensuring regulatory compliance.

Licensee's Proposed Overall Completion Date: *09/20/2023*

On-site Verification ***Implemented [redacted] 12/05/2023)***

This POC was implemented/verified on 12/5/2023. [redacted]

3800.203 Restrictive Procedure Plan

7. Requirements

3800.203.a. For each child for whom restrictive procedures will be used beyond unanticipated use specified in § 3800.204 (relating to unanticipated use), a restrictive procedure plan shall be written and included in the ISP specified in § 3800.226 (relating to content of the ISP), prior to use of restrictive procedures.

Description of Violation

Child A was identified as being subject to restrictive procedures beyond unanticipated use on [redacted] *and a restrictive procedure plan was not written and included in the ISP prior to use of restrictive procedures.*

Plan of Correction ***Accept [redacted] - 10/31/2023)***

The restrictive procedures policy will be re-circulated and reviewed with all supervisors. Supervisors will be reminded that for each child for whom restrictive procedures will be used beyond unanticipated use, a restrictive procedure plan must be written and included in the student's ISP. Restrictive procedure plan drafting duties have been assigned to another member of the staff, who shall be part of the supervisory reporting chain and ensure timely creation and finalization of the plan and ensure that the same is included in the subject student's ISP prior to use of any restrictive procedure going forward. A comprehensive record shall be maintained for all plans. The Compliance Officer shall be responsible for monitoring implementation of this Plan of Correction and ensuring regulatory compliance.

Licensee's Proposed Overall Completion Date: *10/24/2023*

On-site Verification ***Implemented [redacted] - 12/05/2023)***

This POC was implemented/verified on 12/5/2023. [redacted]

3800.213 Restrictive Procedure Records

8. Requirements

3800.213. A record of each use of a restrictive procedure, including the emergency use of a restrictive procedure, shall be kept and shall include the following:

Description of Violation

Child A was subject to a restrictive procedure on [redacted] and there was not a comprehensive record kept and did not include any requirements needed.

Plan of Correction ***Accept[redacted] - 10/31/2023)***

The restrictive procedures policy will be re-circulated and reviewed with all supervisors. Supervisors will be reminded that for each child for whom restrictive procedures will be used beyond unanticipated use, a restrictive procedure plan must be written and included in the student's ISP. Restrictive procedure plan drafting duties have been assigned to another member of the staff, who shall be part of the supervisory reporting chain and ensure timely creation and finalization of the plan and ensure that the same is included in the subject student's ISP prior to use of any restrictive procedure going forward. A comprehensive record shall be maintained for all plans. The Compliance Officer shall be responsible for monitoring implementation of this Plan of Correction and ensuring regulatory compliance.

Licensee's Proposed Overall Completion Date: *10/24/2023*

On-site Verification ***Implemented [redacted] - 12/05/2023)***

This POC was implemented/verified on 12/5/2023.[redacted]