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

March 13, 2024

[redacted], COO
ADELPHOI VILLAGE,INC.
1119 VILLAGE WAY
LATROBE, PA, 15650

RE: MIDDLE CREEK III
1120 VILLAGE WAY
LATROBE, PA, 15650
LICENSE/COC#: 44528

Dear [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]
Western Region Director

cc: Pennsylvania Office of Children, Youth and Families

Agency/Facility Information

Name: *MIDDLE CREEK III*
Address: *1120 VILLAGE WAY, LATROBE, PA 15650*
County: *WESTMORELAND*
License Number: *44528*
License Expiration: *06/02/2024*

Administrator

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

Legal Entity

Name: *ADELPHOI VILLAGE,INC.*
Address: *1119 VILLAGE WAY, LATROBE, PA, 15650*
Phone: [redacted] **Email**: [redacted]

Inspection Information

Start Date: *12/26/2023* **End Date**: *02/01/2024* **Type**: *Complaint* **Notice**: *Announced Visit*
Inspector(s): [redacted]

Inspection Narrative

During a CPS investigation, the Department reviewed video footage and based upon the investigation, is issuing the following citation at Middle Creek III. Please see the attached document for the details.

Inspections / Reviews

12/26/2023 Complaint

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *02/12/2024*

02/20/2024 - POC Submission

Reviewer: [redacted] **Follow Up Type**: *On site Verification* **Follow Up Date**: *03/01/2024*

02/20/2024 On site Verification

Submitted By: [redacted] **Date Submitted**: *02/12/2024*
Reviewer: [redacted] **Follow Up Type**: *Not Required*

3800.32 Specific Rights

1. Requirements

3800.32.b. A child may not be abused, mistreated, threatened, harassed or subject to corporal punishment.

Description of Violation

On [redacted], child A was in an inappropriate physical altercation with staff member A. Staff member A is seen on video pulling back multiple times to punch the child in the midsection. It is unclear from the video if physical contact was made. The child is also seen throwing punches during the video. After a restraint was initiated, the VC was able to kick staff A at which point staff A appears to hit the child.

Plan of Correction ***Accept ([redacted] - 02/20/2024)***

- After review of the emergency physical intervention (EPI), the Unit Director notified Childine and removed the staff from the unit.
- Staff member A was suspended until DHS was able to interview [redacted] with [redacted] termination from the agency occurring after the interview.
- Adelphoi Village has not received official notification regarding the findings of the investigation, however it is our understanding it will be unfounded
- Staff member A acted outside of the approved and trained SCM. [redacted] successfully completed the agency's Safe Crisis Management training upon being hired on August 8, 9 and 10, 2023
- The client did not sustain any injuries from the incident. [redacted] was immediately assessed by the Unit Director following the incident. The Director of Nursing assessed the client the following day and confirmed no injuries or follow-ups needed for the client. Additionally the following day, the Unit Director, with support from another Unit Director, spoke to the client to debrief the incident.
- The Unit Director reviewed in unit team meetings on January 4th and January 11th the basics of SCM focusing on self-management, de-escalation and inter-shift communication among staff team.
- The entire staff team will have a full SCM recertification on February 29th.
- Compliance Caseworker review the next 3 emergency physical interventions at Middle Creek III to ensure de-escalation and proper technique were used by the staff team. Findings of each review will be sent, via email, to the Unit Director, Program Director, Director of QA and Vice President. This will start at acceptance of the plan of correction or recertification date, starting at the earlier date
- Any issues will be addressed immediately by the Vice President of Residential Services.
- The Unit Director is responsible for monitoring and ensuring compliance.

Licensee's Proposed Overall Completion Date: *02/29/2024*

On-site Verification ***Implemented ([redacted] - 03/13/2024)***

On 03/01/2024 a POC verification meeting was held, and 2 files were reviewed to verify the POC was executed. The plan has been implemented.