

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

April 24, 2024

[REDACTED]
SUGAR VALLEY LODGE INC
[REDACTED]
[REDACTED]

RE: SUGAR VALLEY LODGE (HICKORY
ACRES BUILDING)
190 SUGAR VALLEY LANE
FRANKLIN, PA, 16323
LICENSE/COC#: 44770

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/23/2024, 02/23/7202 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 Bureau of Human Service Licensing

Facility Information

Name: SUGAR VALLEY LODGE (HICKORY ACRES BUILDING) License #: 44770 License Expiration: 01/05/2025
Address: 190 SUGAR VALLEY LANE, FRANKLIN, PA 16323
County: VENANGO Region: WESTERN

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: SUGAR VALLEY LODGE INC
Address: [Redacted]
Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Type: I-1 Date: 05/20/2016 Issued By: Sugar Creek Borough

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 34 Waking Staff: 26

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint, Incident Exit Conference Date: 02/27/2024

Inspection Dates and Department Representative

02/23/2024 - On-Site: [Redacted]
02/23/7202 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 28 Residents Served: 26

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 23 Are 60 Years of Age or Older: 18
Diagnosed with Mental Illness: 20 Diagnosed with Intellectual Disability: 1
Have Mobility Need: 8 Have Physical Disability: 1

Inspections / Reviews

02/23/2024 - Partial

Lead Inspector: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 04/01/2024

03/29/2024 - POC Submission

Submitted By: [Redacted] Date Submitted: 04/15/2024
Reviewer: [Redacted] Follow-Up Type: Document Submission Follow-Up Date: 04/22/2024

Inspections / Reviews *(continued)*

04/24/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/15/2024

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 approximately [REDACTED] resident [REDACTED] reported a sexual assault to staff member A. However, Adult Protective Services was not notified.

Plan of Correction

Accept [REDACTED] 03/29/2024)

On [REDACTED] CEO called to file the sexual assault report to Adult Protective Services.

On [REDACTED] CEO educated herself and her other administrative staff on what to report, when to report, and who to report it to.

Starting [REDACTED] CEO and her administrative staff will report all abuse and suspected abuse to adult protective services within 24 hours of it.

Licensee's Proposed Overall Completion Date: 03/22/2024

Implemented [REDACTED] - 04/24/2024)

16c - Written Incident Report

2. 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 [REDACTED], at approximately [REDACTED] resident [REDACTED] reported a sexual assault to staff member A. However, the department was not notified.

Plan of Correction

Accept [REDACTED] - 03/29/2024)

On [REDACTED] CEO filed the sexual assault report to the Department's personal care home regional office.

On [REDACTED] CEO educated herself and her other administrative staff on what to report, when to report, and who to report it to.

Starting [REDACTED] CEO and her administrative staff will report all abuse and suspected abuse to the Department's personal care home regional office within 24 hours of it.

Licensee's Proposed Overall Completion Date: 03/22/2024

Implemented [REDACTED] - 04/24/2024)

42b - Abuse

3. Requirements

2600.

42b - Abuse (continued)

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [REDACTED], at approximately [REDACTED], resident [REDACTED] and resident [REDACTED] were in the common dining area of the home when resident [REDACTED] requested that resident [REDACTED] have [REDACTED] with [REDACTED]. Resident [REDACTED] declined this request. Resident [REDACTED] then grabbed the clothed genital area of resident [REDACTED] with [REDACTED] hand. While Resident [REDACTED] was attempting to physically remove [REDACTED] from this situation, resident [REDACTED] unzipped [REDACTED] pants, displayed [REDACTED], and told resident [REDACTED] to touch it. Resident [REDACTED] then ran out of the dining room crying and reported the incident to staff member A. Both resident [REDACTED] and [REDACTED] were both subsequently placed on 15-minute checks. The Sugar Creek Borough Police were notified on [REDACTED], at approximately [REDACTED] Sugar Creek Borough Police subsequently arrived at the home, questioned, and then arrested resident [REDACTED]. A criminal charge of indecent exposure was filed against resident [REDACTED] at the Commonwealth of Pennsylvania Court of Venango County, District Magistrate: [REDACTED]. Resident [REDACTED] is currently incarcerated while awaiting trial. Staff member C and staff member E both reported that Resident [REDACTED] had a history of inappropriate behaviors directed at staff and that the administration was aware of them, however resident [REDACTED] RASP was not updated to reflect these behaviors.

On [REDACTED], at approximately [REDACTED] resident [REDACTED] and resident [REDACTED] became involved in a verbal confrontation while in the common area. The verbal confrontation was of significant volume and lasted several moments with resident [REDACTED] yelling at resident [REDACTED] hit me we will both go to jail. The verbal confrontation escalated to both residents striking each other. Resident [REDACTED] was struck in the face several times resulting in [REDACTED] glasses being knocked from [REDACTED] face and [REDACTED] having a bloodied nose. Resident [REDACTED] was transported to UPMC Emergency room and treated for [REDACTED] injury. Resident [REDACTED] most recent assessment and support plan completed on [REDACTED], indicates a description of service need for aggression as, has a history of becoming aggressive, [REDACTED] has hit staff, peers and family from previous placements. And a plan to meet this service need indicated in part as; staff will watch for any signs of aggression. Staff will attempt to deescalate by talking with [REDACTED] and giving [REDACTED] space to calm down. Resident [REDACTED] most recent assessment and support plan completed on [REDACTED], indicates a description of service need for aggression as, can become verbally and physically aggressive at times. With a plan to meet the service need of, staff will talk with resident to calm [REDACTED] down and give [REDACTED] a quiet place to calm down. However, staff failed to provide any de-escalatory services before the verbal confrontation escalated to resident [REDACTED] being struck in the face several times. The physical altercation resulted in resident [REDACTED] having a fractured nasal bone and experiencing a significant amount of pain.

Plan of Correction

Accept [REDACTED] - 03/29/2024)

On [REDACTED], [REDACTED] COO came to Hickory Acres to ensure the safety of the residents and staff.

On [REDACTED], [REDACTED] CEO had resident [REDACTED] arrested and removed from the property and ensured the safety of resident [REDACTED].

On [REDACTED], [REDACTED] COO gave verbal education to the staff on how to properly deescalate a situation like the one that occurred.

On [REDACTED], [REDACTED] CEO gave education to her administrative staff on the proper protocol for a sexual abuse occurrence in the resident's home.

Starting on [REDACTED], PCA staff will deescalate all verbal altercations when they arise calling the administrator of the house.

Starting on [REDACTED], [REDACTED] will ensure that all abuse protocol is followed as well as ensuring that the RASP is updated with immediate behaviors.

Licensee's Proposed Overall Completion Date: 03/22/2024

Implemented [REDACTED] 04/24/2024)

187d - Follow Prescriber's Orders

4. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident [REDACTED] is prescribed [REDACTED] orally daily. However, the resident was not administered this medication of [REDACTED], and [REDACTED]. The medication was not in the home.

Plan of Correction

Accept [REDACTED] - 03/29/2024)

On [REDACTED] med-lead called diamond pharmacy to ensure that the medication was on its way, it came in [REDACTED] on the late run.

On [REDACTED] med-tech administered the medication as prescribed by the physician.

Starting [REDACTED] med-lead will audit medication carts monthly to ensure that the medication for all residents is in the building.

Licensee's Proposed Overall Completion Date: 03/22/2024

Implemented [REDACTED] - 04/24/2024)

225a - Assessment 15 Days

5. Requirements

2600.

225.a. A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

Description of Violation

Resident [REDACTED] date of admission [REDACTED], had a known history of indecent exposure prior to admission to the home. On [REDACTED], resident [REDACTED] indicated to a staff member that [REDACTED] breasts were not large enough to produce enough milk for [REDACTED] to drink and requested that [REDACTED] kiss [REDACTED]. On [REDACTED], resident [REDACTED] stared at a [REDACTED] resident for 10 to 15 minutes winking at [REDACTED] multiple times and telling [REDACTED] that [REDACTED] was pretty. Multiple residents indicated [REDACTED] consistently discussed unsolicited, sexually graphic and inappropriate subject matter on a daily basis for a significant portion of time [REDACTED] resided in the home. However, on resident [REDACTED] most recent assessment and support plan the resident's behavioral / cognitive need assessments of irritability, judgment, and aggression, were indicated as no problem.

Plan of Correction

Accept [REDACTED] 03/29/2024)

On [REDACTED] [REDACTED] educated the medical liaison on updating the residents RASP whenever new behaviors or medical issues occur.

On [REDACTED] [REDACTED] medical liaison went through the RASPs to ensure that they are all update to per the residents medical and mental issues.

Starting on [REDACTED] [REDACTED] medical liaison will audit the resident's RASPs quarterly to ensure they are up to date.

Licensee's Proposed Overall Completion Date: 03/22/2024

Implemented [REDACTED] - 04/24/2024)

225c - Additional Assessment

6. Requirements

2600.

225c - Additional Assessment (continued)

225.c. The resident shall have additional assessments as follows:

1. Annually.
2. If the condition of the resident significantly changes prior to the annual assessment.

Description of Violation

Resident [redacted] most recent assessment and support plan was completed on [redacted]

Resident [redacted] most recent assessment and support plan completed on [redacted], indicates a description of service need for aggression as, resident can become verbally and physically aggressive at times. With a plan to meet the service need indicated in part as, staff will talk with resident to calm [redacted] down and give [redacted] a quiet place to calm down. On [redacted], at approximately [redacted] residents [redacted] and [redacted] became involved in a verbal altercation that lasted several minutes before escalating into a physical confrontation that led to both residents striking each other. Resident [redacted] was struck in the face several times knocking [redacted] glasses from [redacted] face and giving [redacted] a bloodied nose. Resident [redacted] was subsequently transported to UPMC Emergency room for treatment of [redacted] injury. However, staff failed to attempt to deescalate the verbal confrontation before the physical confrontation occurred.

Resident [redacted] most recent assessment and support plan completed on [redacted], indicates a description of service need for aggression of, resident has a history of becoming aggressive, [redacted] has hit staff, peers and family from previous placements. With a plan to meet this service need indicated in part as, staff will watch for any signs of aggression, and staff will attempt to deescalate by talking with [redacted] and giving [redacted] space to calm down. On [redacted], at approximately [redacted] residents [redacted] and [redacted] became involved in a verbal altercation that lasted several minutes before escalating into a physical confrontation that led to both residents striking each other. Resident [redacted] was struck in the face several times knocking [redacted] glasses from [redacted] face and giving [redacted] a bloodied nose. Resident [redacted] was subsequently transported to UPMC Emergency room for treatment of [redacted] injury. However, staff failed to attempt to deescalate the verbal confrontation before the physical confrontation occurred.

Resident [redacted] most recent assessment and support plan completed on [redacted], indicates a description of service need for aggression as, no problem. However, on [redacted], resident [redacted] became verbally and physically aggressive with resident [redacted]. Resident [redacted] yelled at resident [redacted] calling [redacted] several derogatory terms and invaded [redacted] personal space. The home had to call the police to defuse the altercation.

Plan of Correction

Accept [redacted] - 03/29/2024)

On [redacted] [redacted] educated the medical liaison on updating the residents RASP whenever new behaviors or medical issues occur.

On [redacted] [redacted] medical liaison went through the RASPs to ensure that they are all update to per the residents medical and mental issues.

Starting on [redacted] [redacted] medical liaison will audit the resident's RASPs quarterly to ensure they are up to date.

Licensee's Proposed Overall Completion Date: 03/22/2024

Implemented [redacted] - 04/24/2024)