

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

June 10, 2024

[REDACTED], ADMINISTRATOR
WASHINGTON MANOR PERSONAL CARE HOME LLC
320 SOUTH WASHINGTON STREET
[REDACTED]

RE: WASHINGTON MANOR PERSONAL
CARE HOME LLC
320 SOUTH WASHINGTON STREET
BUTLER, PA, 16003
LICENSE/COC#: 44863

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/23/2024 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: WASHINGTON MANOR PERSONAL CARE HOME LLC **License #:** 44863 **License Expiration:** 11/27/2024
Address: 320 SOUTH WASHINGTON STREET, BUTLER, PA 16003
County: BUTLER **Region:** WESTERN

Administrator

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

Legal Entity

Name: WASHINGTON MANOR PERSONAL CARE HOME LLC
Address: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 07/24/1985 **Issued By:** Dept L & I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 25 **Waking Staff:** 19

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint **Exit Conference Date:** 04/23/2024

Inspection Dates and Department Representative

04/23/2024 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 25 **Residents Served:** 25

Secured Dementia Care Unit

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

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 22 **Are 60 Years of Age or Older:** 17
Diagnosed with Mental Illness: 25 **Diagnosed with Intellectual Disability:** 2
Have Mobility Need: 0 **Have Physical Disability:** 0

Inspections / Reviews

04/23/2024 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 05/05/2024

05/29/2024 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 06/09/2024
Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 06/05/2024

Inspections / Reviews (*continued*)

06/06/2024 POC Submission

Submitted By: [REDACTED] Date Submitted: 06/09/2024

Reviewer: [REDACTED] Follow Up Type: Document Submission Follow Up Date: 06/13/2024

06/07/2024 Document Submission

Submitted By: [REDACTED] Date Submitted: 06/09/2024

Reviewer: [REDACTED] Follow Up Type: Document Submission Follow Up Date: 06/14/2024

06/10/2024 Document Submission

Submitted By: [REDACTED] Date Submitted: 06/09/2024

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] approximately [redacted] resident #1 made staff person A aware of an allegation of sexual abuse. Resident # 1 indicated that resident #2 touched [redacted] inappropriately by grabbing [redacted] shoulders and touching/rubbing resident #1's butt while resident #2 was giving the resident a hug in the hallway of the home. However, the home did not report the allegation to the local Area Agency on Aging.

Plan of Correction

Accept [redacted] - 06/06/2024)

The care home does not agree with this violation. On [redacted] resident #1 was not even at the care home and did not speak with staff person A. Resident #1 was at [redacted] weekly psychiatric appointment at the care center which [redacted] has every Tuesday at that time. Resident 1 reported to staff person A on Thursday [redacted] at [redacted] a.m. the allegation. The local Area Agency on Aging confirmed to staff person A on [redacted] that their records show they received the allegation report on [redacted]. The home has conducted two trainings on reportable incidents since the inspector visited on 04-23-24. The administrator and manager conducted individual staff trainings on reportable incidents from 04-27-2024 to 04-30-2024. In addition the administrator had the local Ombudsman conduct a staff training on 05-07-2024 on what incidents require an immediate phone call to protective services and which do not to resolve staff confusion on this issue. The administrator and manager will continue to have trainings in July and August 2024 on reportable incidents/resident rights and report immediately to the local Agency on Aging, by phone call, any allegations of sexual impropriety/abuse. The administrator is attempting to have a protective services representative conduct the July 2024 staff training and is awaiting a date they can come. The administrator and manager beginning June 1, 2024 are conducting weekly audits on incidents, if any occur, to ensure staff is reporting correctly and there are no future violations of this regulation.

Licensee's Proposed Overall Completion Date: 06/05/2024

Implemented ([redacted] - 06/10/2024)

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 4/9/24 at approximately 10:30 a.m. resident #1 made staff person A aware of an allegation of sexual abuse. Resident # 1 indicated that resident #2 touched [redacted] inappropriately by grabbing [redacted] shoulders and touching/rubbing resident #1's butt while resident #2 was giving the resident a hug in the hallway of the home. However, the home did not report the allegation to the Department.

16c Written Incident Report (continued)

Plan of Correction**Accept** [REDACTED] - 06/06/2024)

The care home disagrees with this violation since resident #1 was not even present at the care home on [REDACTED] at [REDACTED] but instead at [REDACTED] weekly Tuesday psychiatric appointment at the care center. Resident 1 reported the allegation to staff person A on [REDACTED]. Staff person A reported the incident to the administrator on [REDACTED]. The administrator faxed the incident report on [REDACTED] (see attached incident report and fax confirmation sheet). The administrator and manager have conducted individual trainings on reportable incidents and resident rights from 04 27 2024 to 04 30 2024. The administrator also had the local Ombudsman, on 05 07 2024, conduct a staff training on reportable incidents to clear up staff confusion on what incidents require an immediate phone call to protective services and which do not. The administrator and manager plan on having reportable incident trainings in July and August 2024 and are trying to have a protective services representative conduct the July training but are awaiting a conformed date. In addition the administrator and manger beginning June 1, 2024 are conducting weekly audits on incidents, if any occur, to ensure that staff is reporting them properly and no future violations of this regulation occur.

Licensee's Proposed Overall Completion Date: 06/05/2024**Implemented** [REDACTED] - 06/10/2024)