

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

May 20, 2025

[REDACTED], COMPLIANCE CASEWORKER
ADELPHOI VILLAGE, INC.
1119 VILLAGE WAY
LATROBE, PA, 15650

RE: MANOR ENHANCED
557 MANOR DRIVE
EBENSBURG, PA, 15931
LICENSE/COC#: 33398

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]

cc: Pennsylvania Office of Children, Youth and Families

Agency/Facility Information

Name: MANOR ENHANCED

License Number: 33398

Address: 557 MANOR DRIVE, EBENSBURG, PA 15931

License Expiration: 09/01/2025

County: CAMBRIA

Administrator

Name:

Phone:

Email:

Legal Entity

Name: ADELPHOI VILLAGE, INC.

Address: 1119 VILLAGE WAY, LATROBE, PA, 15650

Phone:

Email:

Inspection Information

Start Date: 03/10/2025

End Date: 03/10/2025

Type: Complaint

Notice: Announced Visit

Inspector(s):

Inspection Narrative

The Department of Human Services conducted a complaint inspection of Adelphoi Village Manor Enhanced on 03/10/2025. During the inspection, Departmental staff interviewed 1 staff member and 1 resident.

The following area of non compliance was found:

Inspections / Reviews

03/10/2025 Complaint

Lead Inspector:

Follow-Up Type: POC Submission

Follow-Up Date: 03/22/2025

03/20/2025 - POC Submission

Reviewer:

Follow Up Type: On site Verification

Follow Up Date: 05/07/2025

03/20/2025 On site Verification

Submitted By:

Date Submitted: 03/19/2025

Reviewer:

Follow Up Type: Not Required

3800.205 Staff Training**1. Requirements**

3800.205.b. Training shall include:

3. The proper use of the specific techniques or procedures that may be used.

Description of Violation

On 02/17/2025, Staff Member A utilized an untrained restrictive procedure technique on Child A.

The agency shall develop a plan to assure that this mandate is being met. The plan shall identify the staff position responsible for monitoring and ensuring regulatory compliance.

Plan of Correction**Accepted () - 03/19/2025)**

- Staff Member A acted outside of agency training, during the use of the restrictive procedure.
- Staff Member A initially completed and successfully passed Safe Crisis Management training on 5/16/2024.
- Staff Member A contacted the Unit Director following the restrictive procedure to inform him of the incident, and his overall concern with the physical intervention.
- The client did not report any injuries when meeting with the unit nurse on 2/18/2025.
- The Unit Director and Regional Program Director reviewed the incident on 2/18/2025 and reported the incident to Childline. The incident was classified as a complaint.
- Staff Member A was removed from a childcare role, per the decision of the program, until DHS investigated the incident.
- Staff Member A was retrained in Safe Crisis Management on 3/12/2025, totaling 6 hours of retraining.
- The Unit Director and Regional Program Director reviewed the incident with the staff team and discussed more effective ways to handle escalated clients.
- The Unit Director will review updated Safe Crisis Management training videos, during weekly staff meetings, for the next four weeks, with periodic assistance from another agency Unit Director.
- The Compliance Caseworker will review the next three restrictive procedures, to ensure proper technique and trainings are being utilized. A summary of each review will be emailed to the VP of Residential Services, Director of Secure Care, Regional Program Director, and the Unit Director.
- The VP, Director, Regional Program Director and Unit Director will immediately address any concerns noted.
- The Unit Director is responsible for monitoring this plan.

Licensee's Proposed Overall Completion Date: 04/30/2025

On-site Verification**Implemented () - 05/16/2025)**

Plan of Correction Verified 05/16/2025