

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

August 20, 2026

[REDACTED]
BARNES AID OPCO LLC
[REDACTED]

RE: BARNES PLACE
2021 JAMES STREET
LATROBE, PA, 15650
LICENSE/COC#: 44488

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/25/2026 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: BARNES PLACE

License #: 44488

License Expiration: 01/11/2027

Address: 2021 JAMES STREET, LATROBE, PA 15650

County: WESTMORELAND

Region: WESTERN

Administrator

Name:

Phone:

Email:

Legal Entity

Name: BARNES AID OPCO LLC

Address:

Phone:

Email:

Certificate(s) of Occupancy

Type: C-2 LP

Date: 09/26/1997

Issued By: Dept L & I

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 72

Waking Staff: 54

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Incident

Exit Conference Date: 06/25/2026

Inspection Dates and Department Representative

06/25/2026 - On-Site:

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 68

Residents Served: 57

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 2

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 57

Diagnosed with Mental Illness: 12

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 15

Have Physical Disability: 0

Inspections / Reviews

06/25/2026 Partial

Lead Inspector:

Follow-Up Type: POC Submission

Follow-Up Date: 07/31/2026

08/13/2026 - POC Submission

Submitted By:

Date Submitted: 08/18/2026

Reviewer:

Follow-Up Type: Document Submission Follow-Up Date: 08/18/2026

Inspections / Reviews *(continued)*

08/20/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/18/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

15a - Resident Abuse Report**1. Requirements**

2600.

15.a. The residence shall immediately report suspected abuse of a home served in the resident's 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 7:45 a.m., staff were made aware of an allegation of sexual assault between resident [REDACTED] and resident [REDACTED]. However, the home did not report this allegation to the local Area Agency on Aging until [REDACTED] at 7:45 p.m.

Plan of Correction**Accept [REDACTED] - 08/13/2026)**

- Staff Member A received additional training in regard to OAPSA and counseling by the Executive Director on 06/22/2026.
- The DHW received additional training in regard to OAPSA and counseling by the Executive Director on 06/30/2026.
- Current Staff are scheduled to attend a training on OAPSA/Abuse Reporting on 08/14/2026.
- The Executive Director or Designee will provide additional trainings monthly about OAPSA/Abuse Reporting for the next 3 months during staff meetings.
- Any additional reporting will be reviewed monthly at the QA meeting. The QA Committee will determine if continued monthly training is necessary based on 3 months of compliance.

Licensee's Proposed Overall Completion Date: 08/15/2026**Implemented [REDACTED] - 08/20/2026)**