

Department of Human Services  
Bureau of Human Service Licensing

July 21, 2021

██████████ ADMINISTRATOR  
MILLETT PINES LLC  
1300 MORGAN HIGHWAY  
CLARKS SUMMIT, PA 18411

RE: THE PINES AT CLARKS SUMMIT  
1300 MORGAN HIGHWAY  
CLARKS SUMMIT, PA, 18411  
LICENSE/COC#: 22612

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/25/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,  
Anne Graziano

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: *THE PINES AT CLARKS SUMMIT* License #: 22612 License Expiration Date: 11/05/2021  
Address : 1300 MORGAN HIGHWAY, CLARKS SUMMIT, PA 18411  
County: LACKAWANNA Region: NORTHEAST

Administrator

Name: [REDACTED] Phone: 5705877709 Email: [REDACTED]

Legal Entity

Name: *MILLETT PINES LLC*  
Address: 1300 MORGAN HIGHWAY, CLARKS SUMMIT, PA, 18411  
Phone: 5705877709 Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 53 Waking Staff: 40

Inspection

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Incident* Exit Conference Date: 05/25/2021

Inspection Dates and Department Representative

05/25/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 72 Residents Served: 39

Secured Dementia Care Unit

In Home: *Yes* Area: *n/a* Capacity: 24 Residents Served: 9

Hospice

Current Resident : 1

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 39  
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
Have Mobility Need: 14 Have Physical Disability: 1

## Inspections / Reviews

05/25/2021 - Partial

Lead Inspector: [REDACTED]

Follow Up Type: *POC Submission*Follow-Up Date: *07/19/2021*

7/21/2021 POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *07/28/2021*

7/21/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

## 15b - Supervisor Plan

## 1. Requirements

2600.

- 15.b. If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

**Description of Violation**

*Resident #1 made an allegation of abuse regarding Direct care staff members A & B on 5/9/21. The home did not implement a plan of supervision.*

**Plan of Correction****Accept**

*The staff of The Pines Senior Living takes all reports of abuse seriously and utilize every measure to ensure the residents are safe and free from harm. All allegations of abuse are reported immediately and staff are trained to report any observed or alleged abuse of a Resident or Staff member.*

*On 5/9/21 Staff Member A went into the Residents room to check on [REDACTED] after a nap. The Resident was sitting on the edge of the bed and Staff A walked the Resident out of the room and down the hall to the common living/dining room. Staff A then left for a break. While the Resident was sitting in the living room [REDACTED] stated to Staff Member B that Staff A hit [REDACTED] in the face. When Staff A returned, Staff B reported what the Resident said. Resident then stated maybe it was [REDACTED]" and pointed to Staff B. The LPN Supervisor was called and the issue was reported. The Supervisor examined the Resident for any physical signs of injury. The skin assessment showed no marks, redness or bruising. The Supervisor noted that the Resident had no observable signs of physical or emotional distress. The Resident was engaging in [REDACTED] normal manner with other residents, staff and activities. When the Supervisor asked, the Resident could not remember anyone hitting [REDACTED] and stated if [REDACTED] said someone hit [REDACTED] [REDACTED] was just joking around. The Supervisor interviewed both Staff A and Staff B and staff wrote down statements about the events. The Supervisor reported the incident to Administration who interviewed staff and the Resident and contacted the Resident's [REDACTED], who stated that [REDACTED] [REDACTED] is often confused and does not remember things. The [REDACTED] apologized to us for the situation and declined to come for a visit at that time. The Area Agency on Aging was contacted. The police were contacted. The Bureau of Human Service Licensing was contacted. Both staff members made it clear that they had not done what the Resident was accusing them of. Both staff members have been with us at The Pines for years without any previous accusations. Our investigation revealed that there was no evidence of abuse based on the staff members' long work history without incident, the Resident's inconsistent and unreliable responses to questions, and no physical or emotional evidence that abuse had occurred. Area Agency on Aging interviewed the Resident on 5/11/21. The Pines proactively took action to assure the safety of the Resident. However we did not develop and mplement a plan of supervision for the 2 staff members which resulted in this violation. Although this past oversight cannot be corrected, should it occur in the future a plan for supervision of staff will be developed. In this case, staff caring for residents would have another staff member accompany them until such time as the BHSL determined that their investigation confirmed that no abuse had occurred. Ultimately the Administrator is responsible to ensure ongoing compliance with this regulation.*

**Completion Date:** 07/20/2021

**Update - 07/21/2021**

*In order to complete the 2 Step Plan of Correction Process, (POC), upon Resubmission of the POC, the Home will submit verification of compliance. This may be a copy of the Home's updated HR Policy regarding Staff Suspension/Supervision in cases of alleged Resident Abuse/Neglect.*

**Document Submission****Implemented**

*Please see the updated Policy and Procedure which is attached*

**15b - Supervisor Plan (continued)****Update - 07/21/2021**

*The Home's policy has been reviewed. It is recommended that the policy be updated to include that the suspected/alleged employee may be suspended during the course of the investigation depending upon the severity of the allegation(s) of abuse and/or neglect for the safety of the resident(s) of the home.*

*Also, the investigation is not concluded until confirmation is received from the Northeastern Regional Office. The Adm should keep a record of who from the Regional Office is confirming that the investigation has concluded and the date.*

*AG, 7-21-21*