



PLOMC, LLC
dba PLOMC COMMUNITY SERVICE
RESIDENTIAL PROGRAM DESCRIPTION

PLOMC Community Service – Nanticoke Residential Facility

412 S. Prospect Street, Upstairs, Nanticoke, PA 18634

Four-Bed, Non-Secure, Community-Based Youth Residential Program

Legal Entity	PLOMC, LLC
Service Name	PLOMC Community Service
Administrative Address	2759 Memorial Hwy Unit 394, Dallas, PA 18612
Telephone	(272) 232-5384
Fax	(484) 229-7403
Website	www.plomc.com

Prepared for Pennsylvania DHS/OCYF licensing and budget review

1. Program Overview

PLOMC, LLC dba PLOMC Community Service will operate the PLOMC Community Service – Nanticoke Residential Facility as a small, non-secure, community-based Residential Living Program for youth. The residence is designed to provide a safe, structured, supportive, family-style environment with 24-hour supervision, individualized service planning, educational support, life-skills development, family and permanency support, recreation, transportation, and coordinated access to medical and behavioral-health services.

The program is intended to serve youth who require out-of-home placement but whose needs can be safely supported in a community residential setting. PLOMC will promote stability, dignity, personal responsibility, healthy relationships, educational continuity, resilience, community involvement, and preparation for reunification, permanency, or greater independence.

2. Facility, Program Type, Capacity and Population Served

Program Element	PLOMC Community Service
Facility	PLOMC Community Service – Nanticoke Residential Facility
Facility Address	412 S. Prospect Street, Upstairs, Nanticoke, PA 18634
Program Type	Residential Living (RES); non-secure, community-based youth residential care
Capacity	Up to four (4) youth
Age Range	13– 18 years for the Residential Living Program
Gender	Male or female youth; placement decisions will consider rooming, privacy, safety, compatibility, and approved program parameters
Hours	24 hours per day, 7 days per week, 365 days per year
Primary Referral Sources	County Children and Youth Services and other legally authorized referral/placing entities

The program may serve youth with emotional, behavioral, trauma-related, developmental, educational, family, or placement-stability needs when PLOMC determines through pre-admission screening that the youth can be safely served within the approved staffing model, physical environment, and community-based level of care.

3. Program Purpose and Service Philosophy

PLOMC Community Service uses a youth-centered, trauma-responsive, and least-restrictive approach. Staff will build predictable routines, positive adult relationships, clear expectations, and opportunities for youth to practice safe decision-making. Services will focus on strengths and needs identified through the referral, assessment, Individual Service Plan (ISP), court or placing-agency requirements, and ongoing team review.

- Provide safe and stable housing with continuous supervision and support.
- Maintain educational enrollment and promote attendance, homework completion, and educational progress.
- Develop practical life skills including cooking, hygiene, laundry, housekeeping, budgeting, financial literacy, consumer skills, time management, transportation awareness, and healthy decision-making.
- Support emotional regulation, coping, communication, conflict resolution, healthy relationships, and age-appropriate independence.
- Promote family engagement and permanency consistent with court orders, the placing agency, safety plans, and the youth's service plan.
- Coordinate medical, dental, vision, behavioral-health, psychiatric, psychological, and other professional services through qualified community providers.

- Provide recreation, community integration, cultural opportunities, employment readiness, and vocational/post-secondary exploration as developmentally appropriate.

4. Admission Criteria and Process

PLOMC will assess each referral before admission to determine whether the youth's needs can be safely and appropriately met. Admission is not automatic and depends on available beds, compatibility with the current resident population, staffing resources, physical accessibility, supervision needs, and the information supplied by the placing agency.

- Youth is generally within the approved Residential Living age range of 13–18.
- There is legal authority for placement and sufficient referral information to make an informed admission decision.
- The youth can be safely served in a non-secure, community-based residential setting.
- The youth is enrolled in, or can be promptly enrolled in, an appropriate educational program.
- Medical, medication, behavioral-health, supervision, accessibility, and transportation needs can be safely supported by PLOMC and qualified outside providers.
- The youth and placing team are able to participate in service planning and the expectations of the residential program.

The pre-admission interview will include placement history, current service plan, education records, medical and medication information, behavioral-health history, trauma and safety concerns, substance-use information, court orders, family/contact restrictions, supervision needs, elopement history, aggression, sexualized behavior concerns, fire-setting history, accessibility needs, and other information relevant to safe placement.

5. Exclusion / Non-Acceptance Criteria

A youth may be declined when the referral indicates needs or risks beyond PLOMC's approved residential model, staffing, training, physical environment, or ability to maintain safety. Examples include:

- A current need for inpatient psychiatric hospitalization, acute detoxification, secure detention, or another level of care that PLOMC is not licensed to provide.
- A pattern or current level of fire-setting, serious violence, sexual aggression, repeated elopement, or other behavior that cannot be safely managed in the non-secure home after individualized review.
- Medical, mobility, nursing, accessibility, or other specialized needs that the facility cannot safely accommodate.
- A need for continuous clinical, medical, educational, or other professional services that PLOMC is not authorized or staffed to provide directly.
- A placement that would create an identified incompatibility or unacceptable safety risk for the referred youth or current residents.

PLOMC will not use a diagnosis, disability, protected characteristic, or prior history alone as an automatic exclusion. Decisions will be individualized and based on the program's approved scope and documented ability to safely meet identified needs.

6. Services Provided Directly by PLOMC

- 24-hour residential supervision, safety monitoring, structured routines, room and board, meals, clothing/personal-needs support, and school supplies as applicable.
- Individual service-plan implementation, progress monitoring, documentation, case coordination, team participation, and discharge/permanency planning.
- Transportation to authorized school, appointments, court/agency meetings, family visits, employment, community services, and activities.
- Daily living and independent-living skill development, including home economics, nutrition, personal care, household management, budgeting, credit/financial awareness, consumer shopping, time management, communication, social skills, public-transportation awareness, fire safety, emergency preparedness, and human-trafficking awareness.

- Structured recreation, community participation, youth development, employment readiness, résumé/interview preparation, and vocational/post-secondary exploration.
- Positive behavioral support, de-escalation, crisis prevention, and implementation of approved plan-based interventions by trained and authorized staff.
- Family/supportive-adult communication and visitation support consistent with court orders and placing-agency direction.

7. Outsourced / Community Professional Services

PLOMC does not represent itself as the direct provider of professional services requiring a separate clinical, medical, psychiatric, psychological, dental, optometric, or educational license unless an appropriately credentialed professional is specifically employed or contracted and the service is within the approved program scope. These services will be coordinated through qualified community providers.

- Primary medical care, physical examinations, specialty medical care, emergency medical care, dental and vision services.
- Psychological, psychiatric, individual, group, and family therapy/counseling when ordered or clinically indicated.
- Substance-use assessment/treatment when indicated.
- K–12 education through the youth's school district or other approved educational placement; GED, post-secondary, vocational and specialized educational services as appropriate.

Availability of psychological and psychiatric services will be based on each youth's assessed need, placing-agency authorization, provider availability, and appointment schedules. PLOMC will document the provider, frequency, and expected hours of service for each youth in the service plan/case record rather than representing a fixed on-site clinical staffing level that has not been established.

8. Staffing Model and Staff Qualifications

PLOMC will maintain sufficient qualified staffing for 24-hour residential operations and will increase staffing when individualized supervision, transportation, activities, emergencies, call-offs, or contract requirements require additional coverage. The program staffing structure is aligned with PLOMC's current budget and organizational model:

- Chief Executive Officer (CEO) – executive leadership, program oversight, quality, compliance, case-coordination oversight, training, and direct-care coverage when needed.
- Chief Operations Officer (COO) – operations, staffing systems, facilities, technology/IT, administrative systems, compliance support, and direct-care coverage when needed.
- Finance and Health Consultant (FHC) – financial oversight/consultation and health-system coordination within the individual's credentials and scope.
- Program Supervisor (PS) – daily program administration, staffing, service-plan oversight, quality assurance, case coordination, on-call supervision and direct-care coverage.
- House Supervisor (HS) – house/shift operations, staff coordination/scheduling, safety, documentation, and direct youth care.
- Lead Child Care Worker (LCCW) – direct youth care, shift leadership, documentation, life-skills support and coaching of direct-care staff.
- Child Care Worker (CCW) – direct supervision, safety, daily living support, transportation, activities, plan implementation and documentation.
- Part-Time Child Care Worker (PTRCCW) – qualified relief and part-time direct-care coverage performing the applicable CCW functions during assigned shifts.

Employees will complete applicable background checks, child-abuse and criminal-history clearances, health screening, orientation, and role-specific training before independent assignments. Training will include mandated reporting, resident rights, supervision, emergency procedures, safe crisis management, fire safety, first aid/CPR as applicable, medication procedures when authorized, suicide prevention, crisis prevention/intervention, professional boundaries, confidentiality, documentation, cultural responsiveness, human-trafficking awareness, missing/elopement response, and other subjects required by regulation, contract, or youth need.

9. Family Involvement

PLOMC encourages safe and appropriate family involvement and supports reunification and permanency whenever consistent with the youth's court order, service plan, placing-agency direction, and safety needs. PLOMC will maintain approved contact restrictions and will not independently alter court-ordered or agency-directed visitation.

- Include approved parents, guardians, and supportive adults in service planning, case reviews, discharge/permanency planning, and educational transition discussions when authorized.
- Facilitate approved telephone/video contact, visits, home passes, and other family contact in accordance with the youth's plan and restrictions.
- Provide or coordinate transportation for approved family visitation when authorized and within program arrangements.
- Share appropriate progress information with authorized family members and support family understanding of youth goals, routines, education, and transition needs.
- Coordinate referrals for family therapy or other professional family services through qualified providers when indicated.

10. Behavior Management

PLOMC will use positive, trauma-responsive, least-restrictive behavior-management practices. Staff will be expected to understand each youth's triggers, strengths, safety needs, coping strategies, and individualized plans. The goal is prevention, de-escalation, skill building, and restoration of safety rather than punishment.

- Use calm communication, active listening, redirection, choices, clear expectations, praise and reinforcement of positive behavior.
- Use structured routines, predictable consequences that are permitted by policy, problem-solving, restorative discussion, and individualized coping strategies.
- Use approved crisis-prevention/intervention techniques only after required training and only within PLOMC policy, the youth's plan, and applicable regulation.
- Immediately obtain supervisory, clinical, medical, law-enforcement, or emergency assistance when the situation exceeds staff authority or can no longer be safely managed in the home.
- Document significant behavioral incidents, interventions, injuries, notifications and follow-up as required; use incident review to identify prevention and training needs.

11. Discipline Practices

Discipline will be individualized, developmentally appropriate, non-punitive, and consistent with PLOMC policy, resident rights, applicable regulations, court orders, and the youth's service plan. PLOMC prohibits corporal punishment, physical or verbal abuse, humiliation, ridicule, threats, degrading treatment, hostile nicknames, retaliation, deprivation of basic needs, and discipline intended to cause physical or psychological harm.

Staff will use positive guidance and reasonable, policy-authorized consequences connected to the behavior and designed to teach responsibility. Restrictions affecting rights, family contact, education, food, sleep, medical care, religious practice, legal counsel, or other protected interests will not be imposed as punishment.

12. Education and Vocational Services

PLOMC will not operate a K–12 school as part of the residential program. Youth will attend the local public school, their school of origin when required and feasible, or another approved educational placement arranged by the responsible education/placing entities. PLOMC staff will support enrollment, attendance, transportation, homework, communication with authorized school personnel, IEP/education meetings when appropriate, and educational progress.

Older youth will receive developmentally appropriate employment and transition support, which may include résumé development, interview preparation, job-search skills, workplace expectations, financial literacy, career exploration, GED coordination, vocational programs, community college/post-secondary exploration, and referrals to qualified community programs.

13. Recreation and Community Integration

PLOMC will provide regular opportunities for structured and unstructured recreation based on age, interests, safety, service goals, and available resources. Activities may include:

- Parks, walking, hiking, biking, sports, fitness and community recreation.
- Libraries, museums, cultural events, school events, community centers and youth-development programs.
- Movies, bowling, amusement/water parks, concerts and other approved community outings.
- Arts and crafts, cooking projects, board games, video games, music, celebrations and indoor recreation.
- Birthday and holiday celebrations, volunteer/service activities and community events.

Staff will supervise activities appropriately and address transportation, permissions, risk considerations, and individual restrictions before participation.

14. Religious and Cultural Observances

During admission and service planning, PLOMC will identify each youth's religious, spiritual, and cultural preferences. PLOMC will make reasonable accommodations for religious observances and practices, including approved attendance at services, dietary considerations, religious materials, and contact with clergy, consistent with safety, court orders, and placing-agency requirements. Youth will not be required to participate in religious activities and may choose not to practice a religion.

15. Health, Medication and Wellness Coordination

PLOMC will coordinate routine and urgent medical, dental, vision, and behavioral-health care and maintain required health information in the youth's record. Medication support and administration will be performed only by staff who have completed required training and authorization. PLOMC staff will observe and report health concerns, arrange appointments and transportation, document authorized medication activities, and follow provider orders within their role. Appropriately licensed providers will retain diagnosis, prescribing, medical assessment, and other professional medical functions.

16. Individual Service Planning and Case Coordination

PLOMC will develop and maintain required service plans in collaboration with the youth, placing agency, family/guardian when authorized, and other members of the service team. Plans will identify strengths, needs, risks, supervision requirements, education, health, behavioral support, family contact, life skills, permanency, transition, and measurable goals.

Staff will document daily observations and progress, participate in reviews, coordinate referrals, communicate significant changes, and update plans as required. Discharge and permanency planning will begin at admission and continue throughout placement.

17. Youth Rights, Communication and Personal Dignity

Youth will be treated with fairness, dignity, and respect and will be informed of program rules, rights, and grievance procedures in a developmentally appropriate manner. PLOMC will protect youth from abuse, neglect, exploitation, discrimination, retaliation and mistreatment. Communication with attorneys, caseworkers, family, clergy and other approved persons will be supported consistent with law, court orders, agency instructions and reasonable program procedures.

18. Safety, Emergency Preparedness and Transportation

PLOMC will maintain written procedures for fire, severe weather, medical emergencies, behavioral crises, suicide/self-harm concerns, suspected abuse, missing/elapsed youth, utility failure, evacuation, shelter-in-place, vehicle emergencies and continuity of operations. Staff will participate in required drills and will call emergency services when reasonably necessary.

Transportation may be provided for school, employment, medical and behavioral-health appointments, court/agency meetings, approved family visitation, recreation and community services. Drivers must meet PLOMC driver and insurance requirements, use required restraints and supervision, and complete transportation documentation.

19. Anticipated Outcomes

- Safe and stable completion of the residential placement.
- Consistent school enrollment, attendance, and educational progress.
- Improved use of coping, communication, problem-solving and conflict-resolution skills.
- Completion of individualized service-plan goals and increased personal responsibility.
- Development of age-appropriate cooking, hygiene, household, budgeting and other daily-living skills.
- Maintenance or strengthening of approved family and supportive-adult relationships.
- Improved employment, vocational or post-secondary readiness for older youth.
- Successful reunification, permanency, transition to a less restrictive setting, or another appropriate next placement.

20. Quality Assurance and Program Review

PLOMC leadership will review program performance using incident trends, grievances, youth and stakeholder feedback, service-plan progress, documentation audits, training records, staffing coverage, health and safety information, fiscal performance, and corrective-action follow-up. Findings will strengthen staff training, policies, supervision, service delivery, and risk management.

21. Licensing and Program Status

This Program Description is intended for licensing, budget review, contracting and program-development purposes. PLOMC Community Service will operate only within the service type, age range, capacity, location, staffing requirements and conditions authorized by the final Pennsylvania DHS/OCYF Certificate of Compliance and applicable contracts. If final licensing direction differs from a proposed parameter in this document, the approved license and applicable regulatory requirements will control and this Program Description will be revised accordingly.

22. Approval

Legal Entity: PLOMC, LLC dba PLOMC Community Service

Program: PLOMC Community Service – Nanticoke Residential Facility

Chief Executive Officer: Suzanne Perry