

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE

# CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to ADELPHOI VILLAGE, INC.

LEGAL ENTITY

To operate ADELPHOI VILLAGE - MIDDLE CREEK II

NAME OF FACILITY OR AGENCY

Located at 1116 VILLAGE WAY, LATROBE, PA 15650

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

To provide Secure Care

TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 14  
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions: \_\_\_\_\_

This certificate is granted in accordance with the Public Welfare Code of 1967, P. L. 31, as amended, and Regulations

55 Pa.Code Chapter 3800: Child Residential and Day Treatment Facilities

(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from June 2, 2011 until June 2, 2012,  
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 411010

*Robert E. Robinson*

ISSUING OFFICER

*Cathy A. Utz*

DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable  
and should be posted in a conspicuous place in the facility.

PW 628 - 4/02



COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF PUBLIC WELFARE  
P.O. BOX 2675  
HARRISBURG, PENNSYLVANIA 17105-2675

Office of Children, Youth & Families  
Deputy Secretary's Office

Phone: 717-787-4756  
Fax: 717-787-0414

JUL 15 2011

Mr. Michael McCalpin, COO  
Adelphoi Village, Inc.  
1119 Village Way  
Latrobe, Pennsylvania 15650

Dear Mr. McCalpin:

RE: Middle Creek II  
Private Facility - Secure Care  
License #411010

As a result of the Department of Public Welfare's licensing/approval inspection on April 4, 2011, of the above-named facility, we have noted areas of non-compliance. Your plan of correction has been reviewed and approved, and a copy of the signed Licensing Inspection Summary is enclosed.

A regular certificate is being issued based on the enclosed Licensing Inspection Summary. This certificate states compliance with Title 55, PA Code: Chapter 3800 Regulations. Your Certificate of Compliance is enclosed.

All areas of non-compliance listed on the enclosed Licensing Inspection Summary must be corrected by the dates specified on the summary. As soon as each area of non-compliance is corrected, you must notify the Regional Office.

Sincerely,

A handwritten signature in cursive script, reading "Cathy A. Utz".

Cathy A. Utz  
Interim Deputy Secretary

Enclosure

## LICENSING/APPROVAL/REGISTRATION INSPECTION SUMMARY

|                                                                              |                       |           |                           |                                     |                                                                                     |             |
|------------------------------------------------------------------------------|-----------------------|-----------|---------------------------|-------------------------------------|-------------------------------------------------------------------------------------|-------------|
| NAME OF AGENCY/FACILITY:<br>Adelphoi Village<br>Middle Creek II-Secure care  |                       |           |                           | TELEPHONE:<br>724-520-1111          | <b>OCYF REGIONAL STAFF APPROVAL</b>                                                 | <b>DATE</b> |
| ADDRESS:<br>1116 Village Way<br>Latrobe Pa 15650                             |                       |           |                           | COUNTY:<br>Westmoreland             |  | 6/27/11     |
| INSPECTED BY:<br><br>Nathan Humes, Amber Kalp, Dave Majcher, Chris Zakraysek |                       |           |                           | INSPECTION DATE(S):<br><br>4/4/2011 |  | 6/29/11     |
| INITIAL<br>INSPECTION                                                        | RENEWAL<br>INSPECTION | COMPLAINT | UNANNOUNCED<br>INSPECTION | RANDOM<br>SAMPLE                    |  | 6/29/11     |
|                                                                              | <b>x</b>              |           |                           |                                     |                                                                                     |             |

Adelphoi Village is a private, not-for-profit agency providing comprehensive, community-based treatment to boys and girls throughout Pennsylvania, West Virginia, Maryland and Delaware. Adelphoi Village has been in operation for 40 yrs. The program provides a place where young people learn positive responses to life's pressures and challenges. Adelphoi Village provides programs and services designed to guide each youth on a path that will provide meaning, purpose and value in his/her life. In cooperation with Children and Youth agencies, Juvenile Probation, mental health agencies and school districts, Adelphoi Village provides services to youth from over 60 counties throughout Pennsylvania.

Adelphoi Village began the Sanctuary Model approval process during this reporting period which is a trauma-informed model of care. The Sanctuary Model is a therapeutic tool for staff and clients, and a guide for forming and maintaining a therapeutic community that promotes safety and nonviolence as the basis for everything Adelphoi Village offers in services to help people heal. Adelphoi Village adopted this model because they recognize and understand the connection of trauma and its effects on behavior. The Sanctuary Model has been proven to: reduce physical aggression and promote a safe, nonviolent atmosphere for everyone from the staff to the residents; to teach individuals and organizations the necessary skills for creating and sustaining nonviolent lives and nonviolent systems; and to keep believing in the unexplored possibilities of peace.

The Department of Public Welfare conducted a Licensing Inspection of Middle Creek II on 4/4/2011 for the licensing year extending from 3-2-2011 to 6-2-2011. Middle Creek II is a secure unit for females ages 13-18 who are delinquent and/or dependent. This program is licensed for 14 residents and at the time of the inspection there were 14 females in the program. This program is designed to treat adjudicated delinquent adolescent girls who have committed serious or chronic offenses, are aggressive, runaway risks and display other serious delinquent behaviors.

During the inspection Departmental staff completed the following: a walk through of the facility with no issues noted; reviewed menus and staffing schedules with no issues noted; reviewed the fire drill logs and medication logs (MAR) and there were no issues noted. There was also a review of the unit's log regarding the use of seclusion and issues were noted as shown below. The Department also reviewed 4 of 14 resident files with no issues noted. Adelphoi Village's records are very well organized and the required treatment plans are always individualized and updated as required.

During the inspection the Department reviewed 40 personnel records. Of the 40 records reviewed, 20 records were of employees hired since the previous inspection, and the remaining 20 records reviewed were employees that have been employed over a year with the agency. The new hire records are reviewed to ensure that the agencies hiring practices are compliant with the regulations. As a result of the personnel records review, there was one violation that was a systemic issue from the previous licensing year. The issue was the protocol specific the agency's requirement to obtain FBI clearances for new staff. Adelphoi Village was conducting the required FBI clearance on newly hired personnel; they were however processing those FBI clearances through the Department of Education link through COGENT rather than the required processing through the Department of Public Welfare Central Child line Abuse Registry link through the COGENT website. This was identified as an issue during last year's inspection, but the agency did not correct this process for the programs licensed in this region; however, they did correct this with another region. Adelphoi Village immediately took the required steps in correcting their process. Of the remaining 20 records those records were reviewed for medical and training updates, and no issues were noted for those records.

The Department interviewed 7 residents during the inspection. During the course of the interviews it was brought to the Departments attention that the Unit was engaging in the practice of seclusion and manual restraints as more of a first response than as a last resort. The children interviewed also stated that their phone calls are restricted based on behavior and at times the children's mail was being withheld and not sent out. It should also be stated that the review of the Unit's log book also reflected the children's statements to the Department and the children's progress notes reflected this information as well. Upon the gathering of this information from the previously stated resources, the Department had a meeting with the Manager that oversee's this program. The Agency took immediate action to end these practices by completing the following: an email was sent to all workers within this unit to immediately stop this practice; there was an impromptu staff meeting called for all staff who works on this unit, and a Department person attended the meeting. At this meeting, there was a discussion regarding the fact that these practices will not be tolerated. The Agency also created a new seclusion protocol, and a new documentation form for the use of seclusion and manual restraints. The Agency Director will monitor compliance with the new protocol and the Department will conduct unannounced inspections to verify that these new procedures are being utilized appropriately and that the use of seclusion and manual restraints protocol is being followed.

The staff interview verified the information gathered by the Department as to the use of seclusion and manual restraints. The staff also stated that there are several opportunities for training.

| 1. 55 PA CODE CHAPTER | 2. NON-COMPLIANCE AREA                                                                                                                                                                                                                                                                                                                           | 3. CORRECTION REQUIRED                                                                                                                                                                   | 4. REQUIRED CORRECTION DATE | 5. PROVIDER'S PLAN OF CORRECTION OR RESPONSE              | 6. STATUS OF CORRECTION |
|-----------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------|-----------------------------------------------------------|-------------------------|
| 3800.206              | The Department learned during the course of the interviews with the children that the staff were secluding children in their rooms on a frequent basis, and that seclusion was being used as a norm within the unit for certain children. This information was confirmed through the Unit's logbook as well as the children's files.             | The Agency will provide the Department with a plan of correction that addresses the proper use of seclusion and that the practice that has been used will cease immediately.             | Immediately and ongoing     | Please see Provider's Plan of Correction and attachments. | PLAN ACCEPTED           |
| 3800.210              | The Department learned during the course of the interviews with the children that the staff was using handcuffs on a frequent and inconsistent basis. The use of mechanical restraints was being used as a norm within the unit for certain children. This information was confirmed through the Unit's logbook as well as the children's files. | The Agency will provide the Department with a plan of correction that addresses the proper use of mechanical restraints and that the practice that has been used will cease immediately. | Immediately and ongoing     | Please see Provider's Plan of Correction and attachments. | PLAN ACCEPTED           |
| 3800.164 (b)          | The Department learned through interviews with                                                                                                                                                                                                                                                                                                   | The Agency will provide the Department with a                                                                                                                                            | Immediately and             | Please see Provider's Plan of Correction and attachments. |                         |

|                |                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                   |                         |                                                           |                  |
|----------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-----------------------------------------------------------|------------------|
|                | the children and review of the Unit's logbook that children that were secluded were provided meals, and that the children were only able to come out of their rooms 1 at a time to eat. Leaving the 2 <sup>nd</sup> and 3 <sup>rd</sup> resident with either cold or luke warm food to consume. They were told that this was what they had to eat. | plan of correction that will ensure in the event there is more than one child secluded that the temperature of the food is the same for all children regardless of the status within the unit.                                                                                    | ongoing                 |                                                           | PLAN<br>ACCEPTED |
| 3800.32 (e)(g) | The Department learned through interviews with the children and review of the Unit's logbook that the removal or limitation of the use of the telephone or the ability to send and receive mail was occurring.                                                                                                                                     | The Agency will provide the Department with a plan of correction that will ensure that at no time is the children's ability to send and receive neither mail nor the use of the telephone to be restricted unless otherwise stated through that specific child's county official. | Immediately and ongoing | Please see Provider's Plan of Correction and attachments. | PLAN<br>ACCEPTED |

THE LEGAL ENTITY REPRESENTATIVE MUST COMPLETE COLUMN 5, SIGN ON THE SIGNATURE LINE AT THE BOTTOM AND DATE ALL PAGES OF THIS DOCUMENT. RETURN THIS ENTIRE DOCUMENT TO YOUR REGIONAL OFFICE BY: XX/XX/XX

Michael McCalpin/s

COO

SIGNATURE OF LEGAL ENTITY REPRESENTATIVE

TITLE

6-24-11

724-520-1111

DATE

TELEPHONE NUMBER



A SERVICE OF **Adelphoi** 

□ **Administrative Office**  
1119 Village Way  
Latrobe, PA 15650  
Phone: 724-520-1111  
Fax: 724-520-1878

□ **Business Office**  
354 Main Street  
Latrobe, PA 15650  
Phone: 724-520-1111  
Fax: 724-539-7060  
[www.adelphoivillage.org](http://www.adelphoivillage.org)

## **Middle Creek Female Secure Plan of correction**

### **3800.206**

Program staff attended a staff meeting on April 6, 2011. The purpose of this meeting was to discuss compliance with 3800.206 as well as to review the unit's plan for managing seclusion events. Middle Creek Female Secure clients will not be placed in their rooms with the door shut unless they meet the criteria for a restrictive procedure/seclusion. A document titled "Seclusion Protocol" was distributed to the unit staff and supplied to The Department of Public Welfare. As part of this protocol, all seclusion events will be immediately reported to the unit supervisor so that the management of such an event can be closely monitored. Documentation methods have also been d adjusted with the addition of the "Addendum to Restrictive Procedure Progress Note". This form acts as a method to document the seclusion event, as well as a guide for staff managing the event. Adherence to 3800.206 will be monitored by the unit supervisor and the program director. *(Note: seclusion protocols attached and agenda from April 6, 2011 staff meeting attached)*

### **3800.210**

The use of mechanical restraints was also reviewed in an April 6, 2011 unit staff meeting. The use of mechanical restraints must be authorized by the unit supervisor or the shift supervisor. Handcuffs will only be applied to clients that resist holds. Handcuffs will not be applied based on the precipitating behavior.



**3800.164**

At an April 6, 2011 unit staff meeting staff it was communicated that food delivery to any client, regardless of their location in the building or status must respect the original preparation of the meal. Food will be delivered to all clients at the same time, or food will be kept at the appropriate temperature until served to the client.

**3800.32**

All clients, regardless of their location in the building or their status will receive their mail daily and be permitted phone access consistent with the unit's practices. Clients will be permitted to make outgoing phone calls on their assigned call days. Clients may receive incoming telephone calls as long verification of the party calling is possible (approved client contact list)