



pennsylvania
DEPARTMENT OF HUMAN SERVICES

DEC 3 1 2014

Mr. Jack Poplar, President/ CEO
Acadia Acquisition, Inc.
1817 Old Homestead Lane
Lancaster, Pennsylvania 17601

RE: Acadia Acquisition 4
950/952 Bentley Ridge Boulevard
Lancaster, Pennsylvania 17602
License #: 331450

Dear Mr. Poplar:

As a result of the Department of Human Services' licensing inspection on December 4, 2014 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

A regular license is being issued based on the enclosed License Inspection Summary. Your license is enclosed.

Sincerely,

A handwritten signature in black ink that reads "Matthew J. Jones".

Matthew J. Jones
Director
134

Enclosures
License
License Inspection Summary

Violation Report: 33145 - 12/04/2014 - Gensil, Lori
 PCH Name: ACADIA ACQUISITION 4

1. REGULATION 55 Pa.Code §2600
 2600.103(f) - Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

2a. DESCRIPTION OF VIOLATION
 The home does not have a thermometer in the freezer located in the office area.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
 Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

2600.103 (f) The damaged freezer thermometers was removed and replaced with a new one the next day after inspection. A second thermometer was purchased for back up. All refrigerator and freezer thermometers will be checked monthly following the monthly checklist. Staff was educated on the importance of having such thermometers in good repair and present. See attached receipt.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) 

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Tracy L. Carl, Residential Director	Date 12/19/14
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>12-19-14</u> (Date)	Plan of correction implementation status as of <u>12-19-14</u> (Date)
The above plan of correction was approved by <u>TE</u> (initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 93145 - 12/04/2014 - Gensil, Lori
 PCH Name: ACADIA ACQUISITION 4

1. REGULATION 55 Pa.Code §2600

2600.132(c) - A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

2a. DESCRIPTION OF VIOLATION

The fire drill record for the drill conducted on 12/3/14 does not include am or pm for the time of the drill.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

2600.132 (c) Seeing the drill was held within the month of December and there was still time in the month to run another drill. A second December fire drill was run. Staff holding and documenting the fire drill were educated on the importance of double checking the documentation of the drill. The administrator was reminded to double check the documentation of the person who ran the drill and it is on our monthly site safety check. See attached drill log.

Repeat Violation: Yes	Date(s) of Previous Violation(s):	09/26/2014	
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 (Date)

The above plan of correction was approved by TC
 (Initials)

Plan of correction implementation status as of 12-19-14
 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 33145 - 12/04/2014 - Gensil, Lori
PCH Name: ACADIA ACQUISITION 4

1. REGULATION 55 Pa.Code §2600
2600.185(a) - The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

2a. DESCRIPTION OF VIOLATION
Resident #2 has a prescription for Motrin 600 mg, as needed for pain. This medication is not available in the home.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

2600.185 (a) The PRN medication that was missing is now accessible for the resident #2. Staff was educated on the importance of all medication and asked to review regulation 2600.185(a). All staff working at the site will sign off that they understand the regulation and need for after reading the regulation. The site administrator or designated staff will do weekly checks of all prescribed meds to assure they are account for.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
(Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) Tracy L Carl, Residential Director

Date 12/19/14

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Violation Report: 33145 - 12/04/2014 - Gensil, Lori
 PCH Name: ACADIA ACQUISITION 4

1. REGULATION 55 Pa.Code §2600

2600.187(a) - A medication record shall be kept to include the following for each resident for whom medications are administered:

- (1) Resident's name.
- (2) Drug allergies.
- (3) Name of medication.
- (4) Strength.
- (5) Dosage form.
- (6) Dose.
- (7) Route of administration.
- (8) Frequency of administration.
- (9) Administration times.
- (10) Duration of therapy, if applicable.
- (11) Special precautions, if applicable.
- (12) Diagnosis or purpose for the medication, including pro re nata (PRN).
- (13) Date and time of medication administration.
- (14) Name and initials of the staff person administering the medication.

2a. DESCRIPTION OF VIOLATION

Direct care Staff Member A administered medications on 11/24/14 and 11/26/14 at 5 PM, but did not include his/her name on the medication administration record or on a master key for November, 2014.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

2600.187 (a) Staff was educated on the importance of all medication and asked to review regulation 2600.187(a). All staff working at the site will sign off that they understand the regulation and need for after reading the regulation. Staff Member A did sign his name to the November master key after being reeducated on the regulation and the need for.

The home will amend residents' MARS to ensure that all the required information is captured, moving forward. -EE

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Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Tracy L. Carl, Residential Director</i>	Date <i>12/19/14</i>
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Violation Report: 33145 - 12/04/2014 - Gensil, Lori
 PCH Name: ACADIA.ACQUISITION 4

1. REGULATION 55 Pa.Code §2600

2600.187(b) - The information in § 2600.187(a)(13) and § 2600.187(a)(14) shall be recorded at the time the medication is administered.

2a. DESCRIPTION OF VIOLATION

On 11/22/14, at 12 pm, Resident #1 was administered Carbamazepine ER 200 mg. The medication was not initialed as given in the medication administration record. Additionally, on 11/26/14 at 5 pm, Citalopram 40 mg was administered and not initialed as given in the medication administration record.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

2600.187(b) Staff was educated on the importance of all medication and asked to review regulation 2600.187(b). All staff working at the site will sign off that they understand the regulation and need for after reading the regulation. There will be a shift by shift check off between shifts. This check off sheet will serve as the staff's double check to assure all meds were given and signed for. This sign off sheet will be in place for 2 months. If no issues arise, the check off sheet process will be removed and only use issues documentation issues become apparent.

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Violation Report: 33145 - 12/04/2014 - Gensil, Lori
 PCH Name: ACADIA ACQUISITION 4

1. REGULATION 55 Pa.Code §2600

2600.187(c) - If a resident refuses to take a prescribed medication, the refusal shall be documented in the resident's record and on the medication record. The refusal shall be reported to the prescriber within 24 hours, unless otherwise instructed by the prescriber. Subsequent refusals to take a prescribed medication shall be reported as required by the prescriber.

2a. DESCRIPTION OF VIOLATION

On 11/2/14, Resident #1 refused to take all noon medications. The home did not report the refusal to the prescriber.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

- 2600.187 (c) Staff was educated on the importance of all medication and asked to review regulation 2600.187(c). All staff working at the site will sign off that they understand the regulation and need for after reading the regulation. Staff will notify the doctor within 24 hours of the medication refusal and document all calls or keep all record of faxes to the clients prescribing physicians

The home will conduct quarterly audits of the medication documentation of refusals to ensure compliance.

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The above plan of correction is approved as of 12-23-14
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The above plan of correction was approved by GE
 (Initials)

Plan of correction implementation status as of 12-23-14
 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented