



pennsylvania
DEPARTMENT OF HUMAN SERVICES

FEB 13 2015

Dr. Dixon Miller, Ph.D., Director of Neuropsychology Services
Acadia Acquisition, Inc.
1817 Old Homestead Lane
Lancaster, Pennsylvania 17601

RE: Acadia Acquisition 2
306/312 Bentley Ridge Boulevard
Lancaster, Pennsylvania 17602
License #: 331430

Dear Dr. Miller:

As a result of the Department of Human Services' licensing inspection on December 8, 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.

Your regular license for the period January 1, 2015 to January 1, 2016 was issued on October 7, 2014. Your regular license remains in good standing.

Sincerely,

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

Matthew J. Jones
Director_{SH}

Enclosure
License Inspection Summary

Violation Report: 33143 - 12/08/2014 - Riel, Becky
 PCH Name: ACADIA ACQUISITION 2

1. REGULATION 85 Pa.Code §2600
 2600.20(b)(1) - The home shall keep a record of financial transactions with the resident, including the dates, amounts of deposits, amounts of withdrawals and the current balance.

2a. DESCRIPTION OF VIOLATION

The home manages the finances for Resident #1. The resident's financial record does not list the type or amount of the transactions dated 10/17 or 10/24/2014.

On 11/21/2014, the balance on the financial record for Resident #1 was \$29.18. A withdrawal of \$19.20 was completed, leaving a balance of \$9.98; however, the balance listed on the financial record shows \$10.08.

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.

2600.20 (b)(1) The administrator reviewed the regulation for 2600.20 (b)(1). The administrator will double check all transactions recorded Resident #1; as well as all other clients who need assistance in securing their funds. After each transaction, the administrator will correctly document any withdraws or deposits into the client's hold so the document correctly reflects the amount of money that is present. Client transaction sheets will be reviewed by the administrator on a weekly basis for 3 weeks. If all documentation of transactions is recorded accurately, administrator will return to quarterly checks. Providing quarterly details of finances to the clients and the client's designated person. The documentation error was amended.

All transactions will be accurately and properly documented in the residents financial records. 02/10/15

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Tracyl Carl, AD, CBIS*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Tracyl Carl, Residential Director* Date *1/9/15*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>2/10/15</u> (Date)	Plan of correction implementation status as of <u>2/10/15</u> (Date)
The above plan of correction was approved by <u>[Signature]</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 33143 - 12/08/2014 - Riel, Becky
 PCH Name: ACADIA ACQUISITION 2

1. REGULATION 55 Pa. Code §2600
 2600.187(d) - The home shall follow the directions of the prescriber.

2a. DESCRIPTION OF VIOLATION

Resident #1 is prescribed Melatonin/3mg/3 tablets every 2 hours before bedtime. The label on the over-the-counter bottle of Melatonin/1mg for the resident states "take 3 pills=3mg". Staff confirmed that the resident is only taking 3 tablets of the 1mg dose. The home is not following the prescriber's order.

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(d) The prescriber of the medication in question was able to clear up the error in documentation. Staff was educated on the importance of all medication and asked to review regulation 2600.187(d). All staff working at the site will sign off that they understand the regulation and need for after reading the regulation. The administrator or designated person will double check the MAR each month and any changes that may occur in month to assure all regulated items are on the MAR.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Tracy L Carl, AD, O34*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Tracy L Carl, Residential Director</i>	Date <i>1/9/15</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 2/10/15
 (Date)

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

Plan of correction implementation status as of 2/10/15
 (Date)

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

Violation Report: 33143 - 12/08/2014 - Riel, Becky
 PCH Name: ACADIA ACQUISITION 2

1. REGULATION 55 Pa. Code §2600
 2600.227(e) - The resident's support plan must document the ability of the resident to self-administer medications or the need for medication reminders or medication administration.

2a. DESCRIPTION OF VIOLATION

Resident #2's assessment, completed 10/10/2014, does not address the resident's ability to self-administer their eye drops.

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.

2600.227 (e) Resident #2's assessment was amended reflecting the prescribing doctor's orders on self administration of eye medications. In future assessments, the site administrator will assure all items are included when completing the annual assessments or when doing assessments due to significant changes.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Tracy L Carl AA CRIS*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Tracy L Carl, Resident Care Director</i>	Date <i>1/9/15</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>2/10/15</u> (Date)	Plan of correction implementation status as of <u>2/10/15</u> (Date)
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The above plan of correction was approved by *BC*
 (Initials)

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