



**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 3  
1104/1114 Bentley Ridge Boulevard  
Lancaster, Pennsylvania 17602  
License #: 331440

Dear Dr. Miller:

As a result of the Department of Human Services' licensing inspection on December 9, 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, appearing to read "Matthew J. Jones", with a long horizontal flourish extending to the right.

Matthew J. Jones  
Director

Enclosure  
License Inspection Summary



Violation Report: 33144 - 12/09/2014 - Riel, Becky  
 PCH Name: ACADIA ACQUISITION 3

1. REGULATION 55 Pa.Code §2600  
 2600.20(b)(8) - The home shall give the resident and the resident's designated person, an itemized account of financial transactions made on the resident's behalf on a quarterly basis.

2a. DESCRIPTION OF VIOLATION  
 The home manages finances for Resident #1. The home does not send a copy of the resident's itemized account of financial transactions on a quarterly basis to the resident's designated person.

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) (8) Starting 2015 all our client's designated person will receive a letter of an itemized account of their financial transactions on a quarterly basis. If they choose not to receive such information we will have the designated person sign a letter stating they do not want to receive the quarter itemized account.

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 CBK*

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 <u><i>2/10/15</i></u> (Date)	Plan of correction implementation status as of <u><i>2/10/15</i></u> (Date)
The above plan of correction was approved by <u><i>[Signature]</i></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: 33144 - 12/09/2014 - Riel, Becky  
 PCH Name: ACADIA ACQUISITION 3

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 11/15/2014, Resident #2 refused to take a scheduled dose of Sinemet 25/100mg, Senna S fab, Vesicare 10mg, and Keppra 750mg. The home did not report the refusal to the resident's doctor as required.

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 record of faxes to the doctor's prescribing the medication. A quarterly check by the site administrator will be done to assure that all staff is following the regulation.

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, CBIS*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *Tracy L. Carl, Residential Director* Date *11/9/15*

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

The above plan of correction is approved as of <u>11/15</u> (Date)	Plan of correction implementation status as of <u>11/15</u> (Date)
The above plan of correction was approved by <u>AA</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