



pennsylvania
DEPARTMENT OF HUMAN SERVICES

NOV 04 2015

Mr. Mark Mortimer, COO
Adelphoi Village, Inc.
1119 Village Way
Latrobe, Pennsylvania 15650

RE: La Sa Quik
651 Saint Michaels Road
Cogan Station, Pennsylvania 17728
License #: 329120

Dear Mr. Mortimer:

As a result of the Department of Human Services' annual licensing inspection on September 30, 2015 of the above facility, the violations with 55 Pa.Code Ch. 3800 (relating to Child Residential and Day Treatment Facilities) 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. 3800 must be maintained.

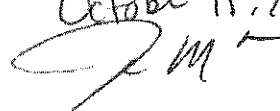
Sincerely,

Matthew J. Jones
Director

Enclosure
License Inspection Summary

VIOLATION REPORT
CHILD RESIDENTIAL LICENSING - 55 Pa.Code Chapter 3800

Facility Name: LA SA QUIK		License Number: 32912
Address: 651 SAINT MICHAELS ROAD, COGAN STATION, PA 17728		County: Lycoming
Director: Rich Shingler		Region: CENTRAL
Legal Entity Name: ADELPHOI VILLAGE INC		
Legal Entity Address: 1119 VILLAGE WAY, LATROBE, PA 15660		
Certificate(s) of Occupancy C-2 LP 02/11/1998 Labor and Industry		
Program Type: Residential Services	Licensed Capacity: 20	Number of Children Served: 18
Type of Inspection: Full	BHA Docket Number:	Notice: Announced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 09/30/2015: Yost, Diana; Shambach, Alexander		
Off-Site Inspection Dates and Inspectors, If Applicable 		
Other Details Partial or Full Triggers: Random Indicators:		
Child Demographic Data as of Inspection Dates		
Age of Children: 0 to 5 years: 0 6 to 13 years: 2 14 to 17 years: 15 18 to 21 years: 1	Number of Children who: Are Adjudicated Delinquent: 18 Are Dependent: 0 Have Mental Illness: 11 Have an Intellectual Disability: 5 Have a Physical Disability: 1	

Jennifer McClaren
Director QA
October 15, 2015


Licensing Inspection Summary: 32912 - 09/30/2015 - Yost, Diana
 Facility Name: LA SA QUIK

1. REGULATION 55 Pa.Code §3800

3800.82(b) - Poisonous materials shall be stored in their original, labeled containers.

2a. DESCRIPTION OF VIOLATION

An unlabeled spray bottle with a hand written label marked "sanitizer" was found in the supply closet with other cleaning supplies.

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.

1. All unmarked containers were removed and replaced with containers labeled by the manufacturer.

Completed By: [Redacted] Unit Supervisor

Date: October 1, 2015

2. Roselle Applewhite, Food Services Coordinator, was trained by the Unit Supervisor, regarding bottle replacement and a reminder / notice was posted in the chemical closets regarding appropriate bottle labels.

Completed By: [Redacted] Unit Supervisor

Date: October 1, 2015

Attached Documentation (2)

3. Roselle Applewhite, Food Services Coordinator will inspect and update bottles each time new chemical orders are received to ensure they are marked. He will remove any unmarked bottles and replace with marked bottles with manufacture labels.

Completed by: [Redacted]

Date: Ongoing

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page)

Date 10-15-15

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

The above plan of correction is approved as of 10-16-15
 (Date)

The above plan of correction was approved by [Signature]
 (Initials)

Plan of correction implementation status as of 10-16-15
 (Date)

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

Licensing Inspection Summary: 32912 - 09/30/2015 - Yost, Diana
Facility Name: LA SA QUIK

1. REGULATION 55 Pa.Code §3800

3800.184(b) - For each prescription and over-the-counter medication including insulin administered or self-administered, documentation in the log shall include the medication that was administered, dosage, date, time and the name of the person who administered or self-administered the medication.

2a. DESCRIPTION OF VIOLATION

Staff Member A did not document his/her signature, or the date and time after administering Loratadine 10 mg and Aderral 10 mg to Child #1 on 9/30/15.

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.

1. Staff member A received a reprimanded for failure to document medication appropriately.-

Completed by: [Redacted] Assistant Supervisor

Date: October 6, 2015

Attached Documentation

2. Staff member A received additional training regarding med. administration documentation.

Completed by: [Redacted] Assistant Supervisor

Date: October 6, 2015

Attached Documentation

3. Staff member A was observed while administering medications for 2 med passes to ensure he is fully aware of the procedures involved for medication documentation.

Completed By: [Redacted] Assistant Supervisor

Date: October 6 and 7, 2015

Attached Documentation

4. A check list was added for all staff to use during daily med. administration to help ensure all MARs are signed for each medication.

Completed By: [Redacted] Assistant Supervisor

Date: By 10/9/15

Attached Documentation

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page)

Jennifer McClaren Director QA

Date 10-15-15

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10-16-15
(Date)

The above plan of correction was approved by


(Initials)

Plan of correction implementation status as of 10-16-15
(Date)

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- ☒ Partially Implemented - Adequate Progress
- ☐ Partially Implemented - Inadequate Progress
- ☐ Not Implemented

STAFF PRIVACY CODING DOCUMENT
CHILD RESIDENTIAL LICENSING - 55 Pa. Code Chapter 3800

Facility Name: LA SA QUIK	License Number: 329120
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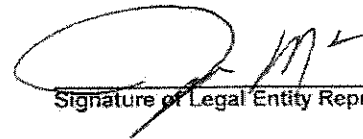
Designation Staff Member's Name

A



Jennifer McClann Drectr OA

Printed Name and Title of Legal Entity Representative

A handwritten signature in dark ink, appearing to be "J. McClann".

Signature of Legal Entity Representative

10-15-15

Date

Date of Inspection: 09/30/2015

CHILD PRIVACY CODING DOCUMENT
CHILD RESIDENTIAL LICENSING - 55 Pa. Code Chapter 3800

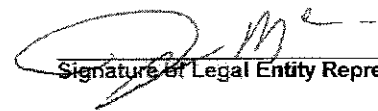
Facility Name: LA SA QUIK	License Number: 329120
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Designation Child's Name

Resident 1



Jennifer McClaren Director QA
Printed Name and Title of Legal Entity Representative


Signature of Legal Entity Representative

10-15-15
Date

Date of Inspection: 09/30/2015