



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAR 30 2017

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

RE: Acadia Acquisition 1
1604/1614 Bentley Ridge Boulevard
Lancaster, Pennsylvania 17602
License #: 331380

Dear Dr. Miller:

As a result of the Department of Human Services' annual licensing inspection on January 18, 2017 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.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

Violation Report: 33138 - 01/18/2017 - Bomberger, Cybil
 PCH Name: ACADIA ACQUISITION 1

1. REGULATION 55 Pa.Code §2600

2600.65(g) - Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:

- (1) Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert.
- (2) Emergency preparedness procedures and recognition and response to crises and emergency situations.
- (3) Resident rights.
- (4) The Older Adult Protective Services Act (35 P. S. §§ 10225.101-10225.5102).
- (5) Falls and accident prevention.
- (6) New population groups that are being served at the home that were not previously served, if applicable.

2a. DESCRIPTION OF VIOLATION

Direct care staff person A did not receive training in Resident Rights and The Older Adult Protective Services Act during the January 1, 2016 through December 31, 2016 training year.

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.

2600.65(g)- The site administrator spoke with the individual staff about the missing training. He reminded direct care person A of the training requirements and needs. The site administrator will review all staff training on at least a monthly basis.

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Trause L Cori, Residential Director</i>	Date <i>1/20/17</i>
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DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 1/23/17
 (Date)

Plan of correction implementation status as of 1/23/17
 (Date)

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

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

Violation Report: 33138 - 01/18/2017 - Bomberger, Cybil
 PCH Name: ACADIA ACQUISITION 1

1. REGULATION 55 Pa.Code §2600
 2600.132(i) - A fire alarm or smoke detector shall be set off during each fire drill.

2a. DESCRIPTION OF VIOLATION
 During the fire drill on 5/31/16 at 3:15 AM, the fire alarm was not sounded. Instead, staff alerted the residents verbally of the fire 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(i)-The regulation and the need for setting off the alarm during a drill was reviewed with all administrators that operate and oversee the fire drills. The site administrator will double check that all fire drills did have the alarm set off during the drill.

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*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Tracy L Carl - Resident Sig/Director* Date *1/20/17*

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The above plan of correction is approved as of 1/23/17
 (Date)

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

Plan of correction implementation status as of 1/23/17
 (Date)

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

Violation Report: 33139 - 01/18/2017 - Bomberger, Cybil
 PCH Name: ACADIA ACQUISITION 1

1. REGULATION 55 Pa.Code §2600
 2600.183(d) - Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home

2a. DESCRIPTION OF VIOLATION

The pro re nata (PRN) medication, Tizanidine HCL 4mg. prescribed for Resident #1 to be taken 3 times daily as needed was discontinued on 4/7/16 but was still stored in the home on 1/18/17.

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.

2600.183(d)-The medication that was to be discontinued was properly disposed of the same day of the site inspection and within the guidelines of company policy. The site administrator will hold medication audits twice a week to assure that only the current and prescribed meds are on the site.

* Staff responsible for medication administration shall be re-educated to remove discontinued medications from the medication cart immediately, to facilitate proper disposal.

BAS
 1/23/17

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 1/20/17

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 (Date)

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

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Violation Report: 33138 - 01/18/2017 - Bomberger, Cybil
 PCH Name: ACADIA ACQUISITION 1

1. REGULATION 55 Pa.Code §2600
 2600.252 - Each resident's record must include the following information: (1) through (26)

2a. DESCRIPTION OF VIOLATION


Resident #2 has resided in the home since [redacted] 2010. Resident #3 has resided in the home since [redacted] 2011. The entire records of these residents have not been maintained by the home as information that was more than three years old, including the preadmission screenings, have been removed from the resident records and are no longer available.

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.

2600.252-Regulation 2600.252 was reviewed with the site administrator. Moving forward, he does have a system in place to assure all client records are preserved and on site. There will be an at random annual audit by someone other than the site administrator for reviewing client charts. The site administrator will also to audit his or her own client charts at time of each client's annual RASP forms.

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 1/23/17

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 (Date)

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

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- Partially Implemented - Inadequate Progress
- Not Implemented