



pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAY 22 2018

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

RE: Colony
111 Church Street
Bradenville, PA 15620

License #459880

Dear Mr. Moteimer:

As a result of the Department of Human Services' (Western Office of Children, Youth and Families) licensing inspection on March 19, 20, 22, and 23, 2018 of the above agency, the violations with 55 Pa.Code Ch. 3800 specified on the enclosed Licensing Inspection Summary were found.

All violations specified on the enclosed Licensing Inspection Summary must be corrected by the dates specified on the Licensing Inspection Summary and continued compliance with 55 Pa.Code 3800 must be maintained.

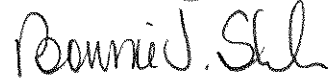
Sincerely,

Cathy Utz
Deputy Secretary

Enclosure
Licensing Inspection Summary

LICENSING/APPROVAL/REGISTRATION INSPECTION SUMMARY

PAGE 1 OF 3 PAGES

NAME OF AGENCY/FACILITY Adelphoi Village, Inc. Colony #459880				TELEPHONE 724-804-7000	OCYF REGIONAL STAFF APPROVAL	DATE
ADDRESS 111 Church Street Bradenville, Pennsylvania 15620				COUNTY Westmoreland		5-15-18
INSPECTED BY Tiana Jordan, John Zubryd, Melissa Zakraysek, Bonnie Studor, Wendy Reed, Daniel Nehlen, Rebecca Lewandowski, Gregory Holts, Jameekia Barnett				INSPECTION DATE 3/19/2018-3/20/2018 3/22/2018-3/23/2018		5-14-18
INITIAL INSPECTION	RENEWAL INSPECTION	COMPLAINT	UNANNOUNCED INSPECTION	RANDOM SAMPLE		5/16/18
	X					

The Department of Human Services, Office of Children, Youth and Families, Western Region (Department) conducted an annual licensing inspection of Adelphoi Village, Inc., Colony Home, on 3/19/2018-3/20/2018 and 3/22/2018-3/23/2018 for the licensing year 6/02/2018 to 6/02/2019. During the inspection, the Department reviewed: 1 of 13 child files and 20 percent of the agency's personnel files, which included all new employees. A physical site inspection was completed, and there was one regulatory concern noted.

The Department conducted a review of the medication administration record and identified one date where staff had not initialed whether or not the child had been administered her medication. In addition, staff had not documented an explanation for the error. The Department spoke with the facility supervisor, who outlined their protocol for addressing staff error on the MAR; the staff member has 72 hours to fix the error, and disciplinary action is taken if it is not fixed within that time frame. The identified error occurred one day prior to inspection.

The Department conducted one staff interview and one resident interview, and each made positive reports about the agency. The child reported she felt safe at the facility, but she also felt that staff's practices were inconsistent. The staff who was interviewed commented on the reliability and strengths of his co-workers.

1. 55 PA CODE CHAPTER	2. NON-COMPLIANCE AREA	3. CORRECTION REQUIRED	4. REQUIRED CORRECTION DATE	5. PROVIDERS PLAN OF CORRECTION OR RESPONSE	6. STATUS OF CORRECTION
3800.185 (a)	Upon review of the medication administration record, it was	The facility shall develop and implement a plan of	May 8, 2018	Colony Home will have the staff team retrained in proper self-	 Plan Accepted


5-7-18

	identified that one of the residents had an undocumented space for a dose of Quetiapine on March 18, 2018. There was no explanation to the error.	correction to ensure all medication errors in the medication log are documented and explained. Medication errors includes the failure to administer medication, administering the incorrect medication, administering correct medication in an incorrect dosage or administering the correct medication at the incorrect time. Furthermore, the plan of correction shall include the facility's procedure to ensure follow up action to prevent future medication errors, and the action is documented.		administration and documentation of medications during a team meeting by May 18th, 2018. This will be facilitated by the unit supervisor using material and information provided by the Adelphoi Director of Nursing. Following this training, the Colony Home staff team will be expected to facilitate the self-administration of medications at prescribed times and document into the Medication Administration Record (MAR) immediately afterward. The shift leaders will review the MARs during every shift to ensure proper self-administration and documentation have occurred beginning May 18th, 2018. The unit supervisor will review the MARs weekly to ensure the medication process is being followed beginning May 18th, 2018. These reviews will be turned into the date they were completed to the compliance caseworker, and unit director with a copy of the Director of Nursing for May, June and July. The unit director will review the MARs monthly to ensure the medication process is being followed beginning May 18th, 2018. These reviews will be turned into the compliance caseworker with a copy of the	
--	--	--	--	---	--

Handwritten signature and date: 5-7-18

				Director of Nursing for May, June and July.	
--	--	--	--	---	--

THE LEGAL ENTITY REPRESENTATIVE MUST COMPLETE COLUMN 5, SIGN ON THE SIGNATURE LINE AT THE BOTTOM AND DATE ALL PAGES OF THIS DOCUMENT. RETURN THIS ENTIRE DOCUMENT TO YOUR REGIONAL OFFICE BY: <u>MAY 8, 2018</u>	
	Director of Quality Assurance
SIGNATURE OF LEGAL ENTITY REPRESENTATIVE	TITLE
May 7, 2018	724-804-7004
DATE	TELEPHONE NUMBER