



pennsylvania
DEPARTMENT OF HUMAN SERVICES

8/14/2020

Adelphoi Village
1119 Village Way,
Latrobe, Pa 15650

RE: Middle Creek II
1116 Village Way,
Latrobe, Pa 15650
License # 411010

Dear Mr. Mortimer,

As a result of the Pennsylvania Department of Human Services, Office of Children Youth and Families, ("Department") review on 8/07/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained

Sincerely,

Tiana Jordan
Human Services Program Representative
Office of Children, Youth and Families

CC: Western Region OCYF

Department of Human Services
Office of Children, Youth and Families
LICENSING/APPROVAL/REGISTRATION INSPECTION SUMMARY
55 PA.CODE CHAPTER 3800

Agency/Facility Information

Name: MIDDLE CREEK II
Address: 1116 VILLAGE WAY,, LATROBE, PA 15650
Phone: 7248047000

License #: 41101
County: WESTMORELAND

Inspection Information

Start Date: 02/24/2020 End Date: 02/27/2020 Type: Renewal Notice: Announced Visit

Inspector(s):

Tiana Jordan, Gregory Holts, Keith Witt, Erin Bauer, Tammy Veverka, Tamara Harrell, John Zubryd, Missy Zakraysek, Rebecca Lewandowski, Alicia Clark, Bonnie Studor

Inspection Narrative

The Department of Human Services, Office of Children, Youth and Families, Western Region (Department) conducted an annual licensing inspection of Adelphoi Village, Inc., Middle Creek II, on 2/24/2020 through 2/27/2020 for licensing year 6/02/2020 to 6/02/2021. During the inspection, the Department reviewed: 10% of the resident files, including files of discharged residents, and the personnel files of all employees. The resident files were noted to meet all state and federal laws and statutes. During review of the personnel files, the Department identified a violation of Mandated Reporter Training in four employee files and a late CPR/First Aid re-certification in another employee file. These violations will result in the issuance of citations and are further outlined below. A physical site inspection was completed, and there were no regulatory concerns observed. The Department interviewed two residents and a staff member during the inspection. One resident explained she participates in daily groups focused on treatment. She explained she has never required a restrictive procedure, adding she seldom sees restraints occur at the facility. She also reviewed the daily schedule, which leaves little idle time. She reported having the opportunity to crochet and watch movies during group time. The second resident admitted to personal struggles within the program and credited the staff for maintaining professionalism and patience with her behaviors. She reported experiencing monthly fire drills and explained a drill is conducted every time a new resident is admitted. The staff member reported feeling well-trained well-prepared in her role with the youth. They explained how de-escalation techniques effectively decrease the number of restraints needed on the unit.

Signature

The legal entity representative must complete the "Provider's Plan of Correction or Response," sign on the signature line below and date all pages of this document. Return this entire document when completed to your Regional Office no later than 06/08/2020.



Signature of Legal Entity Representative

6-8-2020

Date

Jennifer McClaren, RHIA
Name of Legal Entity Representative

Director of Quality Assurance
Title

724/804-7004
Telephone Number

3800.58 Staff Training**1. 55 PA Code Chapter**

3800.58.e. Each staff person who will have regular and significant direct contact with children, shall complete training in first aid, Heimlich techniques and cardiopulmonary resuscitation at least every year. If a staff person has a formal certification from a recognized health care organization which is valid for more than 1 year, retraining is not required until expiration of the certification.

Area of Non-Compliance

During review of the personnel files, the Department identified Staff member E's previous CPR/First Aid certification was issued on 9/01/2017, which expired prior to renewal of the certification on 9/13/2019.

Provider's Plan of Corrective Action or Response

Please see attachment for plan of correction

*Plan Accepted
AOC verified on 8/7/2020, and has been fully implemented.*

Status of Correction:

2. 55 PA Code Chapter

3800.58.b. Prior to working alone with children and within 120 calendar days after the date of hire, the director and each full-time, part-time and temporary staff person who will have regular and significant direct contact with children, shall have at least 30 hours of training to include at least the following areas:

2. 23 Pa.C.S. § § 6301—6385 (relating to child protective services law) and Chapter 3490 (relating to protective services).

3800.58.c. If a staff person has completed the training required in subsection (b) within 12 months prior to the staff person's date of hire, the requirement for training in subsection (b) does not apply.

Area of Non-Compliance

During review of the personnel files, the Department identified Staff Member A completed Mandated Reporter Training on 1/11/2015, and the employee's most recent training certificate was dated 2/07/2020.

During review of the personnel files, the Department identified Staff Member B completed Mandated Reporter Training on 1/09/2015, and the employee's most recent training certificate was dated 2/06/2020.

During review of the personnel files, the Department identified Staff Member C completed Mandated Reporter Training on 1/10/2015, and the employee's most recent training certificate was dated 1/11/2020.

During review of the personnel files, the Department was unable to locate verification to confirm Staff Member D had completed Mandated Reporter training.

3800.58 Staff Training (continued)

Provider's Plan of Corrective Action or Response

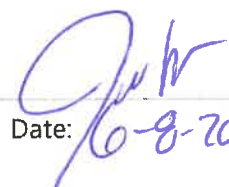
Please see attachment for plan of correction

POC accepted

Status of Correction:

POC verification took place on 8/7/2020, plan was fully implemented.

ADK


6-8-2020

OCYF Regional Staff Approval

Signature



Date

6-15-2020

Signature



Date

9/4/20

Signature

Amber S. Karp

Date

11/30/2020

Middle Creek II (#411010) 3800.58 b & c

Staff C completed the training on 1/11/2020 and was due on 1/10/2020. This staff member started the training on her midnight shift but did not officially finish the training until the 1/11/2020. The onset of the training was on time.

Staff Member D completed the training completed on 03/03/2020

The following procedure will be followed in regard to this area of non-compliance:

- The Program Director will refresh the Unit Director in the use of the agency training data base and monthly training reminder reports. This training will occur by 6/18/2020. Documentation of the training will be forwarded to the Compliance Caseworker for verification.
- A monthly training reminder will be emailed to the Unit Director from a representative in Human Resources indicated all of the trainings due in a 30, 60 and 90 day upcoming period. When a staff is due for a trainings appears on the 60 days monthly training reminder report, if not already enrolled, the Unit Director will enroll the staff.
- The Program Director will review this report with the Unit Director monthly during clinical supervision to ensure compliance is maintained in regard to training. Random reviews of the clinical supervision will be completed by the Director of Quality Assurance and Compliance Caseworker. Any concerns will be addressed with and by the Vice President of Residential Services
- The Unit Director is responsible for monitoring and ensure compliance.

Plan Accepted

6-8-2020

Middle Creek II (#411010) 3800.58e

Staff E was on medical leave from 8/15/2019 to 8/28/2019 and missed the scheduled training. Staff E attended the next scheduled training 9/13/2019.

The following procedure will be followed in regard to this area of non-compliance:

- The Program Director will refresh the Unit Director in the use of the agency training data base and monthly training reminder reports. This training will occur by 6/18/2020. Documentation of the training will be forwarded to the Compliance Caseworker for verification.
- A monthly training reminder will be emailed to the Unit Director from a representative in Human Resources indicated all of the trainings due in a 30, 60 and 90 day upcoming period. When a staff is due for a trainings appears on the 60 days monthly training reminder report, if not already enrolled, the Unit Director will enroll the staff.
- The Program Director will review this report with the Unit Director monthly during clinical supervision to ensure compliance is maintained in regard to training. Random reviews of the clinical supervision will be completed by the Director of Quality Assurance and Compliance Caseworker. Any concerns will be addressed with and by the Vice President of Residential Services
- The Unit Director is responsible for monitoring and ensure compliance.

Plan Accepted

6-8-2020

8/14/2020

Middle Creek II (411010)

On 8/7/2020 the Department went to Adelphoi Village to complete a POC follow-up. While on-site the Department reviewed the new excel spreadsheet process put into place to track the training for all the employees. Adelphoi showed the Department employee record from June and July with the emails that are sent to Unit Directors, Program Director, and HR informing them when employees have upcoming training. The Quality Compliance group will also review employee training hours once a month and notify Program Directors has employees get close to expiration. Employees are noticed 90, 60, and 30 days before their trainings are due to expire. If they do not complete the training before it expires the will be suspended until it is completed.

Tiana Jordan

A handwritten signature in black ink, appearing to be 'TJ' or similar initials, written in a cursive style.

POC Verification