

Department of Human Services
Bureau of Human Service Licensing

September 1, 2022

[REDACTED]

ACADIA ACQUISITION INC
1813 OLD HOMESTEAD LANE,STE 105
LANCASTER, PA, 17601

RE: ACADIA ACQUISITION 5
649/653 PATRIOT DRIVE
LANCASTER, PA, 17601
LICENSE/COC#: 33147

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/07/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
[REDACTED]

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC

Facility Information

Name: *ACADIA ACQUISITION 5* License #: *33147* License Expiration: *01/01/2023*
Address: *649/653 PATRIOT DRIVE, LANCASTER, PA 17601*
County: *LANCASTER* Region: *CENTRAL*

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: *ACADIA ACQUISITION INC*
Address: *1813 OLD HOMESTEAD LANE, STE 105, LANCASTER, PA, 17601*
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *06/24/2003* Issued By: *L & I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *5* Waking Staff: *4*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #: *0*
Reason: *Renewal* Exit Conference Date: *07/07/2022*

Inspection Dates and Department Representative

07/07/2022 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *5* Residents Served: *5*

Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *5* Are 60 Years of Age or Older: *0*
Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *1*
Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

07/07/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *07/30/2022*

08/05/2022 - POC Submission

Inspections / Reviews *(continued)*

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *08/31/2022*

09/01/2022 - Document Submission

Reviewer: [REDACTED] Follow-Up Type: *Not Required*

64a - Admin Training

1. Requirements

2600.

64.a. Prior to initial employment as an administrator, a candidate shall successfully complete the following:

1. An orientation program approved and administered by the Department.

Description of Violation

Staff Person A, who is the home's administrator, has not provided a certificate of completion of the Department's orientation program.

Plan of Correction**Accept**

The home administrative failed to show proof of DHS orientation for new PCHA on 7/7 2022 due to the fact that no class was offered after passing the course back in July last year, and again as forgotten to register for it in the beginning of the new year once the DHS orientation schedule was posted online.

The home supervisor is registered to attend the orientation on [REDACTED] we'll be submitting the document afterward to DHS as proof of completion.

Completion Date: 08/03/2022

Document Submission**Implemented**

The home administrative failed to show proof of DHS orientation for new PCHA on 7/7 2022 due to the fact that no class was offered after passing the course back in July last year, and again as forgotten to register for it in the beginning of the new year once the DHS orientation schedule was posted online.

The home supervisor is registered to attend the orientation on [REDACTED] we'll be submitting the document afterward to DHS as proof of completion.

65d - Initial Direct Care Training

1. Requirements

2600.

65.d. Direct care staff persons hired after April 24, 2006, may not provide unsupervised ADL services until completion of the following:

2. Successful completion and passing the Department-approved direct care training course and passing of the competency test.

Description of Violation

Direct Care Staff Person B, hired on [REDACTED], began providing unsupervised ADL services. However, the staff person did not complete and pass the Department-approved direct care training course and pass the competency test.

Plan of Correction**Accept**

Staff person B was contacted on the day of the initial inspection on [REDACTED] to provide a copy of the competency certificate require by DHS but was not able to provide one.

The home supervisor did a follow-up with staff person B to have the competency test done. Staff person B completed it on [REDACTED] and submitted a copy to site supervisor.

65d - Initial Direct Care Training (continued)

The home supervisor will make sure to double check the required documents which is usually uploaded by the HR department or the Hiring specialist however, the home will make sure to double check on the documents uploaded if we have new hire assigned to that home.

Completion Date: 07/20/2022

Document Submission**Implemented**

Staff person B was contacted on the day of the initial inspection on [REDACTED] to provide a copy of the competency certificate require by DHS but was not able to provide one.

The home supervisor did a follow-up with staff person B to have the competency test done. Staff person B completed it on [REDACTED] and submitted a copy to site supervisor.

The home supervisor will make sure to double check the required documents which is usually uploaded by the HR department or the Hiring specialist however, the home will make sure to double check on the documents uploaded if we have new hire assigned to that home.

104b - Dishes/Glassware/Utensils**1. Requirements**

2600.

104.b. Dishes, glassware and utensils shall be provided for eating, drinking, preparing and serving food. These utensils must be clean, and free of chips and cracks. Plastic and paper plates, utensils and cups for meals may not be used on a regular basis.

Description of Violation

On 07/7/22, two chipped bowls were stored in the kitchen cabinet.

Plan of Correction**Accept**

The home supervisor threw away the chipped bowls immediately upon notification on 7/7/2022.

The home supervisor posted a sign above the kitchen cabinets specifying "Any chipped or cracked bowl and glassware must be disposed of immediately" as reminder on 7/7/2022.

The home supervisor created a daily checklist and posted it in the kitchen for staffs to sign on by confirming "Yes or No" any chip or crack bowl and glassware were found after doing the dishes starting on 7/7/2022. "If yes, they will answer if it was being disposed of immediately."

The home supervisor will be checking every other day to make sure staffs are reporting accurately on the checklist of any crack or chip bowl and glassware stored in the cabinet starting on 7/7/2022.

The checklist will be submitted to the safety committee of the agency upon completion every month starting

104b - Dishes/Glassware/Utensils (continued)

8/1/2022 and thereafter for review.

Completion Date: 07/30/2022

Document Submission

Implemented

The home supervisor threw away the chipped bowls immediately upon notification on 7/7/2022.

The home supervisor posted a sign above the kitchen cabinets specifying "Any chipped or cracked bowl and glassware must be disposed of immediately" as reminder on 7/7/2022.

The home supervisor created a daily checklist and posted it in the kitchen for staffs to sign on by confirming "Yes or No" any chip or crack bowl and glassware were found after doing the dishes starting on 7/7/2022. "If yes, they will answer if it was being disposed of immediately."

The home supervisor will be checking every other day to make sure staffs are reporting accurately on the checklist of any crack or chip bowl and glassware stored in the cabinet starting on 7/7/2022.

The checklist will be submitted to the safety committee of the agency upon completion every month starting 8/1/2022 and thereafter for review.

105g - Lint Removal and Duct Cleaning**1. Requirements**

2600.

105.g. To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

Description of Violation

On 07/07/22, there was an approximate 1 inch accumulation of lint in the lint trap of the dryer, located between the bathroom and Room E. There were no clothes in the dryer at the time.

Plan of Correction

Accept

The home supervisor cleaned the lint out of the dryer immediately upon notification on 7/7/2022.

The home supervisor posted a checklist for all shifts to complete daily and a sign on the dryer's door specifying "The lint trap must be cleaned after ever use" as a reminder on 7/7/2022.

The home supervisor will conduct weekly check of the dryer for lint and will document it on the checklist starting on 7/7/2022 and weekly thereafter.

The checklist will be submitted to the agency's safety committee upon completion every month for review starting 8/1/2022 and monthly thereafter.

The director of residential service will conduct a safety walk-through of the home for fire safety hazards starting 8/1/2022 and monthly thereafter.

105g - Lint Removal and Duct Cleaning (continued)

The director of residential service will check the dryer monthly to ensure it is lint free starting 8/2/2022 and monthly thereafter.

Completion Date: 07/30/2022

Document Submission**Implemented**

The home supervisor cleaned the lint out of the dryer immediately upon notification on 7/7/2022.

The home supervisor posted a checklist for all shifts to complete daily and a sign on the dryer's door specifying "The lint trap must be cleaned after ever use" as a reminder on 7/7/2022.

The home supervisor will conduct weekly check of the dryer for lint and will document it on the checklist starting on 7/7/2022 and weekly thereafter.

The checklist will be submitted to the agency's safety committee upon completion every month for review starting 8/1/2022 and monthly thereafter.

The director of residential service will conduct a safety walk-through of the home for fire safety hazards starting 8/1/2022 and monthly thereafter.

The director of residential service will check the dryer monthly to ensure it is lint free starting 8/2/2022 and monthly thereafter.

225a - Assessment 15 Days**1. Requirements**

2600.

225.a. A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

Description of Violation

Resident 1 was admitted on [REDACTED]; however, the resident's assessment was not completed until [REDACTED]

Repeated Violation - 12/09/19 et al

Plan of Correction**Accept**

The home supervisor will review concerns with the nursing team, case management and intake committee

225a - Assessment 15 Days (continued)

regarding timelines and DHS regulations pertaining to resident assessment by 9/30/22.

The home supervisor will create an auditing tool checklist that will be used to verify that all proper documentation is completed before client is admitted to location or program starting 7/31/2022.

Completion Date: 10/03/2022

Document Submission**Implemented**

The home supervisor will review concerns with the nursing team, case management and intake committee regarding timelines and DHS regulations pertaining to resident assessment by 9/30/22.

The home supervisor will create an auditing tool checklist that will be used to verify that all proper documentation is completed before client is admitted to location or program starting 7/31/2022.

225c - Additional Assessment**1. Requirements**

2600.

225.c. The resident shall have additional assessments as follows:

1. Annually.

Description of Violation

Resident 1's most recent assessment was completed on [REDACTED] the prior assessment was completed [REDACTED]

Plan of Correction**Accept**

The home administrator and Acadia nurse will review all current medical evaluations to ensure medical evaluation are completed accurately and in a timely manner. Any incomplete medical evaluation would be returned to the physician for completion or new in-person medical evaluation will be scheduled and completed. The home administrator will follow up and discuss with Acadia nursing department in regarding medical evaluation by 10/02/22.

Completion Date: 07/30/2022

Document Submission**Implemented**

The home administrator and Acadia nurse will review all current medical evaluations to ensure medical evaluation are completed accurately and in a timely manner. Any incomplete medical evaluation would be returned to the physician for completion or new in-person medical evaluation will be scheduled and completed. The home administrator will follow up and discuss with Acadia nursing department in regarding medical evaluation by 10/02/22.