

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

September 19, 2023

[REDACTED]
ACADIA ACQUISITION INC
[REDACTED]

RE: ACADIA ACQUISITION 4
950 BENTLEY RIDGE BOULEVARD
LANCASTER, PA, 17602
LICENSE/COC#: 33145

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/30/2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: ACADIA ACQUISITION 4 License #: 33145 License Expiration: 12/31/2023
 Address: 950 BENTLEY RIDGE BOULEVARD, LANCASTER, PA 17602
 County: LANCASTER Region: CENTRAL

Administrator

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

Legal Entity

Name: ACADIA ACQUISITION INC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 05/01/2001 Issued By: L & I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 8 Waking Staff: 6

Inspection Information

Type: Full Notice: Unannounced BHA Docket #: 0
 Reason: Renewal Exit Conference Date: 08/31/2023

Inspection Dates and Department Representative

08/30/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 8 Residents Served: 8

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 7 Are 60 Years of Age or Older: 0
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 2
 Have Mobility Need: 0 Have Physical Disability: 1

Inspections / Reviews

08/30/2023 - Full

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 09/17/2023

09/18/2023 - POC Submission

Submitted By: [REDACTED] Date Submitted: 09/19/2023
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 09/23/2023

Inspections / Reviews *(continued)*

09/19/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/19/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 09/24/2023

09/19/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/19/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

54a - Direct Care Staff

1. Requirements

2600.

54.a. Direct care staff persons shall have the following qualifications:

- 2. Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry.

Description of Violation

Direct care staff person A, does not have a high school diploma, GED, or active registry status on the Pennsylvania nurse aide registry.

Plan of Correction

Accept (████ - 09/18/2023)

54a violation, staff member A, which is █████ resigned and is no longer working with us. █████ gave us two weeks notice but then █████ decided not to finish the two weeks. █████ last day here at Acadia was September █████.

Acadia HR and Resditinal management will be meeting to develop a new checklist for the new hire applicant. The new applicant checklist will include having a High school diploma. (GED). If the new applicant does not have the correct document, Acadia will request a waiver. The checklist will be developed by 10-8.

Licensee's Proposed Overall Completion Date: 09/18/2023

Implemented (████ - 09/19/2023)

103f - Refrigerator/Freezer Temps

2. Requirements

2600.

103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

Description of Violation

On 8/30/23 at 2:34 pm, the temperature in the refrigerator was 50 degrees Fahrenheit.

Plan of Correction

Accept (████ - 09/18/2023)

The site supervisor implemented a checklist for staff to check the fridge thermometers once a month to make sure the thermometers work properly.

The refrigerator thermometer is replaced, and the thermometer reading is below 40 degrees Fahrenheit. Please see the attached paperwork.

Licensee's Proposed Overall Completion Date: 09/15/2023

Implemented (████ - 09/19/2023)

105g - Lint Removal and Duct Cleaning

3. 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.

105g - Lint Removal and Duct Cleaning (continued)

Description of Violation

The home dryer ducts were not cleaned in 2022.

Repeat violation - 7/6/22 et al

Plan of Correction

Accept [redacted] - 09/18/2023)

8/30/2023 An Email was sent from Bentley Ridge maintenance to clean the outside of the apartment ductwork, moving forward When they have completed the outside ductwork cleaning PCHA will request a copy of the work completed to include in the DHS binder. See attached for a copy of the form. PCHA and the Director of Residential Services will put on the calendar July 1st, 2024 to send to maintenance on request clean done by August 30th. PCHA will follow up to get the document done by August.

Licensee's Proposed Overall Completion Date: 09/15/2023

Implemented [redacted] - 09/19/2023)

107d - Procedure Emergency Management Agency Submission

4. Requirements

2600.

107.d. The written emergency procedures shall be reviewed, updated and submitted annually to the local emergency management agency.

Description of Violation

The home's written emergency procedures were not reviewed and submitted to the local emergency management agency (EMA) in 2022.

Plan of Correction

Accept [redacted] - 09/18/2023)

The director of Residential Services updated the emergency procedures and submitted the written plan to the local agency (EMA) for 2022.

The Residential director will put a reminder on the calendar on 9/7/2024 to update and submit the plan.

Please find the attachment for a document.

Licensee's Proposed Overall Completion Date: 09/15/2023

Implemented [redacted] - 09/19/2023)

132g - Fire Drills Days/Times

5. Requirements

2600.

132.g. Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

Description of Violation

The home often holds fire drills between 12-1 am and 4-5 pm as evidenced by the following drills:

1/26/23 at 12:12 am

4/20/23 at 12:20 am

7/14/23 at 12:46 am

132g - Fire Drills Days/Times (continued)

2/28/23 at 4:30 pm

5/31/23 at 4:30 pm

Plan of Correction

Accept [REDACTED] - 09/18/2023)

Acadia site supervisors/staff are to follow the fire drill schedule to conduct a monthly fire drill. The fire drill schedule was updated to include a two-hour increment on when the drill should be completed. Moving forward, the site supervisor will make sure the fire drill is conducted at different times at different shifts to meet DHS requirements.

Licensee's Proposed Overall Completion Date: 09/15/2023

Implemented [REDACTED] - 09/19/2023)

190a - Completion Medication Course**6. Requirements**

2600.

190.a. A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

Description of Violation

Staff person A, who has not completed the Department-approved medications administration course since [REDACTED]/22, administered medications to resident 1 as follows:

On 8/5/23 at [REDACTED]

On 8/5/23 at [REDACTED]

Plan of Correction

Accept [REDACTED] - 09/18/2023)

Staff person A has resigned as of [REDACTED]-23, no longer working. Moving forward site supervisor will be following the medication administration training tracking form. The compliance checklist to make sure staff is updated on medication certification training per DHS requirements every 6 months is as follows.

Please find the attachment document.

Licensee's Proposed Overall Completion Date: 09/15/2023

Implemented [REDACTED] - 09/19/2023)

190b - Insulin Injections**7. Requirements**

2600.

190.b. A staff person is permitted to administer insulin injections following successful completion of a Department-approved medications administration course that includes the passing of a written performance-based competency test within the past 2 years, as well as successful completion of a Department-approved diabetes patient education program within the past 12 months.

Description of Violation

On 8/5/23 and 8/6/23 at [REDACTED] staff person A, who has not successfully completed a department-approved diabetes

190b - Insulin Injections (continued)

patient education program with in the last 12 months performed [REDACTED] on Resident 1.

On 8/4/23, 8/11/23, 8/18/23 and 8/25/23 at 8 pm, staff person B, who has not successfully completed a department-approved diabetes patient education program with in the last 12 months, [REDACTED] Resident 1.

Plan of Correction**Accept [REDACTED] - 09/18/2023)**

A staff B person registered to complete the diabetes training on October, 5th 2023. The Client Health and Wellness department will develop a tracking chart for staff [REDACTED] due dates. This chart will alert the Client Health and Wellness department of due dates so they are able to schedule the staff for the training. This will prevent the staff from being out of compliance with [REDACTED] training. If staff is late for training, they will be notified that they are unable to administer [REDACTED] until training is completed.

Staff person B registered to complete [REDACTED] training by 10/5/23. Please find the attached document.

Licensee's Proposed Overall Completion Date: 09/15/2023

Implemented [REDACTED] - 09/19/2023)