

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

October 10, 2023

[REDACTED]
ACADIA ACQUISITION INC
[REDACTED]
[REDACTED]

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 08/31/2023 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]
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: ACADIA ACQUISITION 5 License #: 33147 License Expiration: 01/01/2024
 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: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 06/24/2003 Issued By: L & I
 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: 08/31/2023

Inspection Dates and Department Representative

08/31/2023 - 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

08/31/2023 - Full

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

09/25/2023 - POC Submission

Submitted By: [REDACTED] Date Submitted: 10/09/2023
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 10/02/2023

Inspections / Reviews *(continued)*

10/03/2023 - POC Submission

Submitted By: [REDACTED] [REDACTED] t

Date Submitted: 10/09/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 10/08/2023

10/10/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/09/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

65f - Training Topics

1. Requirements

2600.

65.f. Training topics for the annual training for direct care staff persons shall include the following:

1. Medication self-administration training.
4. Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
5. Personal care service needs of the resident.
6. Safe management techniques.

Description of Violation

Direct care staff person A did not receive the following training during the 2022 training year:

1. *Medication self-administration training.*
2. *Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.*
3. *Safe management techniques.*

Plan of Correction

Accept [REDACTED] (09/25/2023)

The staff member does not administer medication and is not involved in the process at all as [REDACTED] is not med trained.

[REDACTED] medication administration training is scheduled for 10/2/23 - 10/4/23. See attached

The staff member attended training to comply with 65(f) (2) on 3/29/23. See attached transcripts

The staff member attended training on safe management techniques on 3/29/23. See attached transcripts.

A checklist will be developed for required trainings and will list the 2600 regulation that is corresponds to.

Licensee's Proposed Overall Completion Date: 09/23/2023

Implemented [REDACTED] (- 10/10/2023)

65g - Annual Training Content

2. Requirements

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. Videos prepared by a fire safety expert are acceptable for the training if accompanied by an onsite staff person trained by a fire safety expert.
2. Emergency preparedness procedures and recognition and response to crises and emergency situations.
5. Falls and accident prevention.

Description of Violation

Staff person A did not receive the following training during the 2022 training year:

1. *Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert. Videos prepared by a fire safety expert are acceptable for the training if accompanied by an onsite staff person trained by a fire safety expert.*
2. *Emergency preparedness procedures and recognition and response to crises and emergency situations.*
3. *Falls and accident prevention.*

65g - Annual Training Content (continued)

Plan of Correction

Accept () - 09/25/2023)

1& 2. The staff member is scheduled to complete the training to comply with 65(g)(1) and 65(g) (2) by 9/29/23.

Home administrator will submit proof

3. The staff member completed training to comply with 65(g)(3) on 3/27/23 and 4/18/23. See attached transcripts.

A checklist will be developed for required trainings and will list the 2600 regulation that is corresponds to.

Licensee's Proposed Overall Completion Date: 09/23/2023

Implemented () - 10/10/2023)

103f - Refrigerator/Freezer Temps

3. 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 4:10 PM the temperature in the freezer was 3 degrees Fahrenheit, and on 8/31/23 at 9:10 AM, it was 5 degrees Fahrenheit.

Plan of Correction

Accept () - 09/25/2023)

During the inspection the fridge cold control was not working properly which caused the freezer to give a different reading at the time of the inspection. The home administrator put a work order and before it was replaced the maintenance person's thermometer was -4 degrees while the fridge thermometer was above zero degree. The control was replaced by maintenance and a new ice bucket was added as well. See attached.

Licensee's Proposed Overall Completion Date: 09/23/2023

Implemented () - 10/10/2023)

105g - Lint Removal and Duct Cleaning

4. 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

The home's dryer duct was not cleaned in 2022.

Repeat violation - 7/6/22 et al

Plan of Correction

Accept () - 10/03/2023)

An Email was sent to request maintenance to clean the outside of the apartment ductwork. The request was completed on 9/11/2023. 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. See attachment.

Licensee's Proposed Overall Completion Date: 10/03/2023

105g - Lint Removal and Duct Cleaning (continued)

Implemented [REDACTED] - 10/10/2023)

107d - Procedure Emergency Management Agency Submission

5. 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 sent to local emergency management agency (EMA) in 2022.

Plan of Correction

Accept [REDACTED] - 10/03/2023)

The director of Residential Services updated the emergency procedures and submitted the written plan to the local agency (EMA) for 2023. 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: 10/03/2023

Implemented [REDACTED] - 10/10/2023)