

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

December 3, 2024

[REDACTED]
SUCCESS REHABILITATION INC.
[REDACTED]

RE: ACADIA NEUROREHAB #2
306/312 BENTLEY RIDGVE BLVD.
LANCASTER, PA, 17602
LICENSE/COC#: 33964

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/16/2024, 10/17/2024 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 NEUROREHAB #2 **License #:** 33964 **License Expiration:** 03/15/2025
Address: 306/312 BENTLEY RIDGVE BLVD., LANCASTER, PA 17602
County: LANCASTER **Region:** CENTRAL

Administrator

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

Legal Entity

Name: SUCCESS REHABILITATION INC.

Address: [REDACTED]

Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 10/21/1999 **Issued By:** L&I
Type: Other **Date:** 10/21/1999 **Issued By:** L&I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 12 **Waking Staff:** 9

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Interim **Exit Conference Date:** 10/17/2024

Inspection Dates and Department Representative

10/16/2024 - On-Site: [REDACTED]

10/17/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 8 **Residents Served:** 6

Secured Dementia Care Unit

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

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 2 **Are 60 Years of Age or Older:** 3
Diagnosed with Mental Illness: 4 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 6 **Have Physical Disability:** 6

Inspections / Reviews

10/16/2024 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 11/08/2024

Inspections / Reviews *(continued)*

11/12/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/02/2024

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 12/02/2024

12/03/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/02/2024

Reviewer: [REDACTED]

Follow Up Type: Not Required

107d - Procedure Emergency Management Agency Submission

1. Requirements

2600.

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

Description of Violation

At the time of the [redacted] inspection, the home's written emergency procedures have not been sent to the local emergency management agency since 9/7/23.

Plan of Correction

Accepted [redacted] - 11/12/2024)

- 1. The residential director completed training with site supervisors on regulation 107.d on 10/31/24.
- 2. The emergency procedures are in the process of being updated and will be sent out to the local mgmt. agency by 11/15/24. This will be completed by the residential director.
- 3. The plan will become the responsibility of the residential director to update the emergency procedures and send it out to the local mgmt. agency. This will be completed annually.
- 4. The residential director will put a reminder in her calendar for the next due date to ensure it is completed and sent out on time.

Licensee's Proposed Overall Completion Date: 11/15/2024

Implemented [redacted] - 12/03/2024)

185a - Implement Storage Procedures

2. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident [redacted] is prescribed [redacted], take 1 tablet every 4 hours as needed. On [redacted], this medication was not available in the home. The home only had a stock supply of QC Suphendrine 30mg tablets.

Resident [redacted] is prescribed [redacted], and [redacted] as needed. On [redacted], the medications and treatments were not available in the home.

Plan of Correction

Accepted [redacted] - 11/12/2024)

- 1. The residential director completed training with site supervisors on regulation 2600. 185.a on 10/31/24.
- 2. Training will be completed on the regulation 2600.185.a with all staff by 11/30/24. This training will be completed by a site supervisor.
- 8. The Administrator or designee will complete an audit on all resident medications, including PRN's, to ensure medications are available as ordered. This initial audit will be completed by 11/18/24.
- 9. Education will be provided to all staff who administer medications on where medications are stored by 11/15/24.
- 10. Beginning 11/18/24, monthly audits will be completed on all resident medications to ensure medications are available for administration as ordered.
- 11. Documentation of completed audits and education will be kept by the home and available for review by the Department.

185a Implement Storage Procedures (continued)

Licensee's Proposed Overall Completion Date: 11/18/2024

Implemented [REDACTED] - 12/03/2024)

187d - Follow Prescriber's Orders

3. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident [REDACTED] is prescribed [REDACTED], take 1 capsule by mouth at bedtime as needed for nerve pain. However, per Resident [REDACTED]'s October 2024 medication administration record, this medication was administered on [REDACTED] at 4:09AM.

Plan of Correction

Accept [REDACTED] - 11/12/2024)

1. The residential director completed training with site supervisors on regulation 2600.187.d on 10/31/24 and with the CHW department on 11/5/24.
2. An internal investigation will be completed to get clarification from the Dr if the medication is PRN or PRN at bedtime only. this will be completed by a site supervisor or a designee and will be completed by 11/15/2024
2. Education will be provided to all staff who administer medications on 2600.187(d) by 11/15/24 by the Administrator or designee.
5. Beginning no later than 11/18/24, the Administrator or designee will complete monthly audits of all resident Medication Administration Records to ensure medications are being administered as ordered by the physician.
6. Documentation of completed audits, education and physician notification will be kept by the home and available for review by the Department.

Licensee's Proposed Overall Completion Date: 11/18/2024

Implemented [REDACTED] - 12/03/2024)