Department of Human Services
Office of Children, Youth and Families
Licensing Inspection Summary - Public
55 PA.CODE CHAPTER 3800

February 21, 2025

[redacted], EMBARK VP
CHANGE ACADEMY LAKE OF THE OZARKS, LLC
2177 EAST WARNER ROAD,SUITE 101
Suite 101
TEMPE,, AZ, 85287

RE: EMBARK AT THE POCONOS
108 COUNTRY PLACE LANE
WHITE HAVEN,, PA, 18661
LICENSE/COC#: 23009

Dear [redacted],

As a result of the Pennsylvania Department of Human Services, Office of Children, Youth and Families licensing inspections on of the above facility, the citations specified on the enclosed Licensing Inspection Summary (LIS) were found.

We have determined that your plan of correction is: Acceptable

Please submit documentation verifying compliance in SansWrite as corrective actions are implemented. The Department will review this documentation to determine compliance. Please note that in order for the Department to verify your compliance, you are required to upload documentation into SansWrite AFTER the Plan of Correction has been accepted by the Department, and not with the initial submission of your Plan of Correction.

Submit documentation electronically by **03/21/2025**.

If you need assistance regarding submission of evidence to demonstrate compliance, please contact me at or email [redacted]

Sincerely,

[redacted]

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Office of Children, Youth and Families

Agency/Facility Information

Name: *EMBARK AT THE POCONOS*
License Number: *23009*
Address: *108 COUNTRY PLACE LANE, WHITE HAVEN,, PA 18661*
License Expiration: *02/25/2025*
County: *LUZERNE*

Administrator

Name: [redacted] **Phone**: **Email**:

Legal Entity

Name: *CHANGE ACADEMY LAKE OF THE OZARKS, LLC*
Address: *2177 EAST WARNER ROAD,SUITE 101, Suite 101, TEMPE,, AZ, 85287*
Phone: [redacted] **Email**: [redacted]

Inspection Information

Start Date: *11/18/2024* **End Date**: *11/19/2024* **Type**: *Renewal* **Notice**: *Announced Visit*
Inspector(s): [redacted]

Inspection Narrative

The Department of Human Services Office of Children Youth & Families conducted the renewal inspection of Embark of The Poconos. The inspection consisted of record reviews of 4 children and all staff members, a physical site inspection, medication audit, policy and procedure review, and interviews with staff and children. The following violations are being cited in accordance with the 3800 regulations and require a plan of correction.

Inspections / Reviews

11/18/2024 Renewal

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *01/24/2025*

02/19/2025 - POC Submission

Submitted By: [redacted] **Date Submitted**: *02/19/2025*
Reviewer: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *02/26/2025*

02/21/2025 - POC Submission

Submitted By: [redacted] **Date Submitted**: *02/19/2025*
Reviewer: [redacted] **Follow-Up Type**: *Document Submission* **Follow-Up Date**: *03/21/2025*

3800.31 Notification of Rights and Grievance Procedures

1. Requirements

3800.31.d. A statement signed by the child, the child's parent and, if applicable, the child's guardian or custodian, acknowledging receipt of a copy of the information specified in subsection (a), or documentation of efforts made to obtain the signature, shall be kept.

Description of Violation

The statement for Child C's rights is signed but did not have a date to show when it was signed

Plan of Correction ***Accept (- 02/19/2025)***

Enrollment Director tasked with conducting a review at time of admission to assure signature with date is completed.

Licensee's Proposed Overall Completion Date: *01/21/2025*

3800.51 Child Abuse and Criminal History Checks

2. Requirements

3800.51. Child abuse and criminal history checks shall be completed in accordance with 23 Pa.C.S. § § 6301 6385 (relating to the Child Protective Services Law) and Chapter 3490 (relating to protective services).

Description of Violation

Staff member E was hired on and did not obtain required Child Abuse clearances until 2/14/24.

Plan of Correction ***Accept (- 02/19/2025)***

Root cause of issue determined to be HR director's Leave of Absence (LOA) and back-up personnel not completing task timely.

Moving forward, in the event of HR LOA, Executive Director will work with Regional HR Director assure clearances are obtained prior to an employee starting with the program.

Licensee's Proposed Overall Completion Date: *01/21/2025*

3. Requirements

3800.51. Child abuse and criminal history checks shall be completed in accordance with 23 Pa.C.S. § § 6301 6385 (relating to the Child Protective Services Law) and Chapter 3490 (relating to protective services).

Description of Violation

Staff member F was hired on and did not obtain required Pennsylvania State Police clearances until 9/27/24.

Plan of Correction ***Accept (- 02/19/2025)***

Root cause of issue determined to be HR director's Leave of Absence (LOA) and back-up personnel not completing task timely.
Moving forward, in the event of HR LOA, Executive Director will work with Regional HR Director assure clearances are obtained prior to an employee starting with the program.

Licensee's Proposed Overall Completion Date: *01/21/2025*

3800.58 Staff Training

4. Requirements

3800.58.d. After initial training, 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 40 hours of training annually relating to the care and management of children. This requirement for annual training does not apply for the initial year of employment.

3800.58 Staff Training *(continued)*

Description of Violation

Staff person A did not have 40 hours of annual training after the initial year of employment. Staff A's training file only showed 14.5 hours of annual training.

Plan of Correction ***Accept (- 02/21/2025)***

Employee completed all training hours by 12/31/24.

Training Log is available for review but cannot be uploaded/attached here. Please advise if email can be sent separately.

Executive Assistant (EA) is responsible to monitor completion of staff trainings.

EA notifies assigned supervisor when trainings are incomplete.

In the event staff does not comply with completion deadlines, the supervisor institutes disciplinary action. While progressive in nature, non compliance will result in suspension from duty until trainings are completed.

Licensee's Proposed Overall Completion Date: *02/19/2025*

3800.141 Child Health and Safety Assessment

5. Requirements

3800.141.a. A child shall have a written health and safety assessment within 24 hours of admission.

Description of Violation

Child C did not have a written health and safety assessment within 24 hours of admission. Child C did have a written health and safety assessment, but there was no date and time to show when the document was created.

Plan of Correction ***Accept (- 02/21/2025)***

Corrective Action:
Time and date are on the plan (see attached)
Clinical Director to conduct weekly Communication with the clinicians via individual and group supervision
Clinical Director to complete weekly Chart audits to ensure compliance.
Clinical Director to do immediate follow up if not in compliance.

Licensee's Proposed Overall Completion Date: *02/19/2025*

3800.142 Health and Safety Plan

6. Requirements

3800.142. If the health and safety assessment in § 3800.141 (relating to health and safety assessment) identifies a health or safety risk, a written plan to protect the child shall be developed and implemented within 24 hours after the assessment is completed.

Description of Violation

Child C's health and safety assessment identified a health or safety risk, and the facility did not write or implement a plan within 24 hours after the assessment is completed to protect the child. Child C's safety plan did not have a date or time to show when the document was created.

3800.142 Health and Safety Plan *(continued)*

Plan of Correction ***Accept (- 02/21/2025)***

Corrective Action:

Time and date are on the plan (see attached)
Clinical Director to conduct weekly Communication with the clinicians via individual and group supervision
Clinical Director to conduct weekly Chart audits to ensure compliance.
Clinical Director to do Immediate follow up if not in compliance.

Licensee's Proposed Overall Completion Date: *02/19/2025*

7. Requirements

3800.142. If the health and safety assessment in § 3800.141 (relating to health and safety assessment) identifies a health or safety risk, a written plan to protect the child shall be developed and implemented within 24 hours after the assessment is completed.

Description of Violation

Child A's health and safety assessment identified a health or safety risk, and the facility did not write or implement a plan within 24 hours after the assessment is completed to protect the child. Child A's safety plan did not have a date or time to show when the document was created.

Plan of Correction ***Accept (- 02/21/2025)***

Corrective Action:
Time and date are on the plan (see attached)
Clinical Director to conduct weekly Communication with the clinicians via individual and group supervision
Clinical Director to complete weekly Chart audits to ensure compliance.
Clinical Director to complete immediate follow up if not in compliance.

Licensee's Proposed Overall Completion Date: *02/19/2025*

8. Requirements

3800.142. If the health and safety assessment in § 3800.141 (relating to health and safety assessment) identifies a health or safety risk, a written plan to protect the child shall be developed and implemented within 24 hours after the assessment is completed.

Description of Violation

Child C's health and safety assessment identified a health or safety risk, and the facility did not write or implement a plan within 24 hours after the assessment is completed to protect the child. Child C's safety plan did not have a date or time to show when the document was created.

Plan of Correction ***Accept (- 02/21/2025)***

Corrective Action:
Time and date are on the plan (see attached)
Clinical Director to complete weekly Communication with the clinicians via individual and group supervision
Clinical Director to conduct weekly chart audits to ensure compliance.
Clinical Director to do immediate follow up if not in compliance.

Licensee's Proposed Overall Completion Date: *02/19/2025*

3800.151 Staff Health Statement

9. Requirements

3800.151 Staff Health Statement *(continued)*

3800.151. A staff person or volunteer who comes into direct contact with the children or who prepares or serves food, shall have a statement signed and dated by a licensed physician, certified registered nurse practitioner or licensed physician's assistant, within 12 months prior to working with children or food service and every 2 years thereafter, stating that the person is free of serious communicable disease that may be spread through casual contact or that the staff person has a serious communicable disease that may be spread through casual contact but is able to work in the facility if specific precautions are taken that will prevent the spread of the disease to children.

Description of Violation

Staff person D did not have the required statement signed and dated by a licensed physician, certified registered nurse practitioner or licensed physician's assistant, within 12 months prior to working with children or food service and every 2 years thereafter.

Plan of Correction ***Accept ([redacted] - 02/19/2025)***

HR Director is responsible party for assuring Staff health Statements are completed timely. A log of due dates is maintained by the HR Director.

HR sends out form and reminder notices 1 month prior to expiration

Error occurred in this instance because at time renewal was due, staff member [redacted] resigned from his position. The date of his resignation pre-dated the expiration of the clearance.

During the notice period, [redacted] opted to rescind [redacted] resignation. [redacted] was sent for the exam once decision to retain [redacted] was made.

Moving forward, staff without updated clearances will not report to work until exam and medical clearance is obtained.

Licensee's Proposed Overall Completion Date: *01/21/2025*

3800.184 Medication Log

10. Requirements

3800.184.b. For each prescription and over-the-counter medication including insulin administered or self-administered, documentation in the log shall include the medication that was administered, dosage, date, time and the name of the person who administered or self-administered the medication.

Description of Violation

Staff member B administered [redacted] on 11/17/24 at 9AM and there were no initials entered into the medication log. The log only included a small dot indicating that the medications were given, but it did not include Staff member B's signature.

Plan of Correction ***Accept ([redacted] - 02/21/2025)***

RN Manager will review medication administration documentation training with the staff member who made the error.

Staff member [redacted] will sign off on training once completed

RN Manager will complete monthly supervision with RN team members to monitor compliance with policy and procedures.

3800.184 Medication Log (continued)

RN Manager will conduct trainings and implement corrective action when if/errors occur.

** Note: Staff member "B" listed in the privacy coding is a student name. Staff member who made the error has initials EL*

Licensee's Proposed Overall Completion Date: *02/19/2025*