

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

March 2, 2026

[REDACTED], COO
ADELPHOI VILLAGE, INC.
1119 VILLAGE WAY
LATROBE, PA, 15650

RE: COLONY
111 CHURCH STREET
BRADENVILLE, PA, 15620
LICENSE/COC#: 45988

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Office of Children, Youth and Families review on 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]
Western Region Director

cc: Pennsylvania Office of Children, Youth and Families

Agency/Facility Information

Name: COLONY

License Number: 45988

Address: 111 CHURCH STREET, BRADENVILLE, PA 15620

License Expiration: 06/02/2025

County: WESTMORELAND

Administrator

Name: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Legal Entity

Name: ADELPHOI VILLAGE, INC.

Address: 1119 VILLAGE WAY, LATROBE, PA, 15650

Phone: [REDACTED]

Email: [REDACTED]

Inspection Information

Start Date: 02/25/2025

End Date: 02/28/2025

Type: Renewal

Notice: Announced Visit

Inspector(s):

[REDACTED]

Inspection Narrative

The Department of Human Services, Office of Children, Youth and Families, Western Region (Department) conducted an Annual Licensing Inspection of the Adelphoi Village Inc., Colony on 2/25/2025 through 2/28/2025 for the licensing year 6/02/25 to 6/02/26. During the inspection, the Department reviewed: 3 of 37 current/discharged children's files and all personnel file which included new and tenured employees. A physical site inspection was completed and there were no regulatory concern noted. The Department interviewed a child from the program. The child stated that the program has prepared her for her upcoming discharge next month. She said that it took her sometime to take ownership of her behaviors, but she finally gets it. While talking to staff she stated that she is comfortable with her responsibilities and feels supported by administration and peers. The Licensing Inspection Summary (LIS) from last year's inspection was reviewed, and there will be a citation for Development of the ISP and Medication Log.

Inspections / Reviews

02/25/2025 - Renewal

Lead Inspector: [REDACTED]

Follow Up Type: POC Submission

Follow Up Date: 03/24/2025

04/21/2025 POC Submission

Reviewer: [REDACTED]

Follow-Up Type: On-site Verification

Follow-Up Date: 07/01/2025

04/21/2025 - On-site Verification

Submitted By: [REDACTED]

Date Submitted: 03/25/2025

Reviewer: [REDACTED]

Follow-Up Type: Not Required

3800.184 Medication Log

1. Requirements

3800.184.c. The information in subsection (b) shall be logged at the same time each dosage of medication is administered or self-administered.

Description of Violation

The medication log for child A was not completed at the same time each dosage of medication was administered. The MAR was missing documentation for December 26th [REDACTED] at 9:00 pm.

Plan of Correction

Accept ([REDACTED]) - 04/18/2025)

- During a staff meeting on 3/24/2025, the Unit Director and Regional Program Director, reviewed documentation expectations as they pertain to medication administration.
- During the program clinical team meeting on 3/20/2025, medication captain responsibilities will be designated to the unit therapist, with the expectation for weekly MAR reviews.
- The newly designated medication captain will submit weekly Monday morning MAR reviews, including an email to the Unit Director, Program Director, and Compliance Caseworker, for two months.
- The assigned unit nurse will increase her monthly MAR reviews from once a month, to twice per month, for two months. An email of the review will include the Unit Director, Regional Program Director, and Compliance Caseworker.
- Compliance Caseworker will conduct random MAR checks, for two months, to confirm all documentation is correct. A summary of the results will be emailed to the Unit Director, Regional Program Director, and VP of Residential Services.
- The Unit Director and Regional Program Director will immediately address any issues.
- The Unit Director will be responsible for monitoring this plan.

Licensee's Proposed Overall Completion Date: 05/25/2025

On-site Verification

Implemented ([REDACTED]) - 03/02/2026)

Plan implemented.

3800.224 Development of the ISP

2. Requirements

3800.224.a. An ISP shall be developed for each child within 30 calendar days of the child's admission.

3800.224.c. Reasonable effort shall be made to involve the child and the child's parent and, if applicable, a guardian or custodian, in the development of the ISP at a time and location convenient for the child, the child's parent, the child's guardian or custodian, if applicable, and the facility.

Description of Violation

*Child A was admitted on [REDACTED] and the initial ISP was developed on [REDACTED]
Child B was admitted on [REDACTED] and the initial ISP was developed on [REDACTED] these two reports are outside of the initial 30-day ISP timeframe.*

Plan of Correction

Accept ([REDACTED]) - 04/18/2025)

224 a

- The Regional Program Director will meet with the program clinical team on 3/20/2024, to discuss roles and responsibilities and timeliness for ISP completion.
- The program Clinical Coordinator will be responsible for completing timely ISPs.
- During the program clinical team meeting on 3/20/2025, the clinical coordinator will be provided with a tracking

3800.224 Development of the ISP (continued)

tool to utilize for ISP completions.

- During clinical supervision with the clinical coordinator, the Unit Director will review ISP timeliness, discuss any ISPs that will be due in the next 30 days, and ensure the ISP date is on the program calendar for completion. Supervision will be submitted monthly to the Regional Program Director and Compliance Caseworker, for the next three months.
- The program Clinical Coordinator will be assigned a mentor from another program, to assist with processes and workflows.
- The program Clinical Coordinator will meet with an electronic health record support staff, on 3/26/2025, to ensure a full understanding of the ISP completion process within the system.
- Compliance Caseworker will monitor the next three new admissions, to ensure timely ISPs are completed. A summary of the review will be emailed to the Unit Director, Regional Program Director, and VP of Residential Services.
- The Unit Director and Regional Program Director will immediately address any issues.
- The Unit Director will be responsible for monitoring this plan.

224 c

- The Regional Program Director will meet with the program clinical team on 3/20/2024, to discuss roles and responsibilities, specifically related to sending ISP meeting invitations to all parties involved.
- During clinical supervision with the clinical coordinator, the Unit Director will review ISP invitations, while discussing the importance of involving all parties in the plan. Supervision from April will be submitted to the Regional Program Director and Compliance Caseworker.
- The program Clinical Coordinator will be responsible for ensuring ISP invitations are sent out to all parties involved.
- The program Clinical Coordinator will be assigned a mentor from another program, to assist with processes and workflows.
- Compliance Caseworker will monitor the next three new admissions, to ensure ISP invitations are being sent. A summary of the review will be emailed to the Unit Director, Regional Program Director, and VP of Residential Services.
- The Unit Director and Regional Program Director will immediately address any issues. The Unit Director will be responsible for monitoring this plan.

Licensee's Proposed Overall Completion Date: 06/25/2025

On-site Verification

Implemented () - 03/02/2026)

Plan implemented.