

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to RICHLAND CHRISTIAN HOME, INC

LEGAL ENTITY

To operate RICHLAND CHRISTIAN HOME

NAME OF FACILITY OR AGENCY

Located at 211 SOUTH RACE ST. PO BOX 735, RICHLAND, PA 17087

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

To provide Personal Care Homes

TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 32
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller. (MAXIMUM CAPACITY)

Restrictions: _____

This certificate is granted in accordance with the Public Welfare Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes

(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from August 23, 2012 until August 23, 2013,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **328910**

Robert E. Robinson

ISSUING OFFICER

RC [Signature]

DIRECTOR

NOTE: This certificate is issued for the above site(s) only and is not transferable
and should be posted in a conspicuous place in the facility.

PW 628 - 01/11



SEP 18 2012

Ms. Cheryl M. Bollinger, RN, PCHA
Richland Christian Home, Inc.
719 East Lincoln Avenue
Myerstown, Pennsylvania 17067

RE: Richland Christian Home
211 South Race Street, P.O. Box 735
Richland, Pennsylvania 17087

Dear Ms. Bollinger:

As a result of the Department of Public Welfare's (Department) licensing inspection on June 28, 2012 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Human Services Licensing so that compliance can be verified.

A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

Sincerely,

A handwritten signature in black ink, appearing to read "R Melusky", with a horizontal line extending to the right.

Ronald Melusky
Director

Enclosures
License
Violation Report

Violation Report: 32891 - 06/28/2012 - Minnich, Ron
 PCH Name: RICHLAND CHRISTIAN HOME

1. REGULATION 55 Pa.Code §2600

2600.65(a) - Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following:

- (1) Evacuation procedures.
- (2) Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable.
- (3) The designated meeting place outside the building or within the fire-safe area in the event of an actual fire.
- (4) Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable.
- (5) The location and use of fire extinguishers.
- (6) Smoke detectors and fire alarms.
- (7) Telephone use and notification of emergency services.

2a. DESCRIPTION OF VIOLATION

Direct Care Staff Person A, hired on 3/05/12, did not receive the trainings required under this regulation until 4/05/12.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

From this day forward, the administrator will make certain that each new employee will receive an orientation in general fire safety + emergency preparedness, as outlined in Regulation 55 Pa.Code §2600.65(a), prior to or during their first work day.

We have a checklist on the front of each employee file to remind the administrator of all the things that are required to be included in the file +/or done upon employment of an individual.

This violation occurred as a result of the administrator's lack of experience, + it shall never occur again under her watch!

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Cheryl M. Bollinger, RN, PCHA*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Cheryl M. Bollinger, RN, PCHA* Date *8/6/12*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>9/12/12</u> (Date)	Plan of correction implementation status as of <u>9/12/12</u> (Date)
The above plan of correction was approved by <u>NSC</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 32891 - 06/28/2012 - Minnich, Ron
 PCH Name: RICHLAND CHRISTIAN HOME

1. REGULATION 55 Pa.Code §2600
 2600.65(b) - Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following:
 (1) Resident rights.
 (2) Emergency medical plan.
 (3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P.S. §§ 10225.101-10225.5102).
 (4) Reporting of reportable incidents and conditions.

2a. DESCRIPTION OF VIOLATION
 Direct Care Staff Person A, hired on 3/05/12, did not receive the trainings required under this regulation until 4/05/12.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

From this day forward, the administrator will make certain that each new employee will receive, within 40 scheduled working hours, an orientation that includes the items outlined in Regulation 55 Pa. Code § 2600.65(b).

We have a checklist on the front of each employee file to remind the administrator of all the things that are required to be included in the file +/or accomplished upon employment of an individual.

This violation occurred as a result of the administrator's lack of experience, + it shall never occur again under her watch!

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Signature of Legal Entity Representative
 (Required on EVERY Page) *Cheryl M. Bollinger, RN, PCHA*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Cheryl M. Bollinger, RN, PCHA</i>	Date <i>8/8/12</i>
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Violation Report: 32891 - 06/28/2012 - Minnich, Ron
 PCH Name: RICHLAND CHRISTIAN HOME

1. REGULATION 55 Pa.Code §2600
 2600.132(e) - A fire drill shall be held during sleeping hours once every 6 months.

2a. DESCRIPTION OF VIOLATION
 Sleeping hours fire drills were held on 10/30/11 and 5/29/12. The sleeping hours fire drills were held more than six months apart.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The administrator has scheduled fire drills on a calendar, + has included one drill during sleeping hours every 6 months.

This violation occurred because we had a daytime fire drill in the presence of our fire chief during the month when a night time fire drill was due. The night drill was then done the following month.

From now on, if such an occasion occurs, the administrator will simply have 2 fire drills during one month, in order to be certain that a sleeping hours drill is held at least once every 6 months.

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Violation Report: 32891 - 06/28/2012 - Minnich, Ron
 PCH Name: RICHLAND CHRISTIAN HOME

1. REGULATION 55 Pa.Code §2600

2600.132(h) - Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

2a. DESCRIPTION OF VIOLATION

During the fire drill conducted on May 29, 2012, residents were evacuated to the enclosed 2nd floor deck. The enclosed 2nd floor deck is not designated as a fire safe area.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The administrator will never allow residents to evacuate to the second floor deck again.

Residents will be instructed before the next fire drill that the fire safe area is behind the fire wall + includes only the enclosed landing and stairwell to the rear of the building. The fire safe areas to the front of the building are outside the front doors onto the porches. Only these three areas will be used as ~~fire~~ locations to evacuate to for fire safety (from the upper level).

Employees will be made fully aware of this as well through our communication book (read by each care giver at the start of each shift) + through information given at staff meeting.

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Violation Report: 32891 - 06/28/2012 - Minnich, Ron
 PCH Name: RICHLAND CHRISTIAN HOME

1. REGULATION 55 Pa.Code §2600

2600.141(a)(1) - A resident shall have a medical evaluation by a physician, physician's assistant, or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission.

2a. DESCRIPTION OF VIOLATION

The medical evaluation for Resident #1 was completed in 11/4/11, which is not within 60 days prior to or 30 days after the resident's admission date on 3/13/12.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Upon admission of a resident, the administrator will be certain to check not only the date the medical evaluation form was completed, but also the date of the actual evaluation. If the actual evaluation was greater than 60 days prior to admission, the administrator will facilitate having the physician do a medical evaluation within the first 30 days after admission.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Cheryl M. Bollinger, RN, PCH Date 8/8/12

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- Fully Implemented
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- Partially Implemented - Inadequate Progress
- Not Implemented