



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

OCT 08 2013

Ms. Rhonda L. Layman, President
P.A.L., Inc.
Ridgeview Residential Care
122 Ridgeview Street
Youngwood, Pennsylvania 15697

Dear Ms. Layman:

As a result of the Department of Public Welfare's licensing inspection on August 5, 2013 and August 6, 2013, of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) must be maintained.

Your regular license for the period November 6, 2013 to November 6, 2014 was issued on July 30, 2013. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink, appearing to read 'R. Melusky', written over a horizontal line.

Ronald Melusky
Director

Enclosure
License Inspection Summary

Violation Report: 42858 - 08/05/2013 - Miller-Linhart, Alden
PCH Name: RIDGEVIEW RESIDENTIAL CARE

SEP 6 2013

WEST REGION FIELD OFFICE
Human Services Learning

1. REGULATION 55 Pa.Code §2600

2600.25(b) - The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

2a. DESCRIPTION OF VIOLATION

The contract for resident #1, dated 2/14/13, was not signed by the home's administrator or a designee.

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.

Contract for resident #1 was signed and dated by [redacted] Admin. on 8/7/13.

Administrators will ensure that all contracts are signed by admin. or designee on future contracts.

9-30-13 - The administrator or designated staff person will review all resident contracts to ensure all current contracts are signed in accordance with regulation 2600.256. 9-12-13

9-30-13 - All staff persons involved in the admissions process will be educated on the requirements of regulation 2600.256. Documentation of education will be kept. 9-12-13

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page) *Rhonda L. Layman*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Rhonda L. Layman, Pres.* Date *8/26/13*

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

The above plan of correction is approved as of <u>9-12-13</u> (Date)	Plan of correction implementation status as of <u>9-12-13</u> (Date)
The above plan of correction was approved by <u>[initials]</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>9-12-13</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

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SEP 6 2013

WEST REGION FIELD OFFICE
Human Services Licensing

Violation Report: 42858 - 08/05/2013 - Miller-Linhart, Alden
PCH Name: RIDGEVIEW RESIDENTIAL CARE

1. REGULATION 55 Pa. Code §2600

2600.26(b) - The quality management plan shall address the periodic review and evaluation of the following:

- (1) The reportable incident and condition reporting procedures.
- (2) Complaint procedures.
- (3) Staff person training.
- (4) Licensing violations and plans of correction, if applicable.
- (5) Resident or family councils, or both, if applicable.

2a. DESCRIPTION OF VIOLATION

The home's quality management review, dated 11/12/12, did not address staff training or complaint and reportable incident reporting procedures.

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.

Reviewed regulations for quality management review. All 5 topics will be addressed in future reviews. Quality management review done on 8/26/13. Copy of review enclosed.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative
(Required on EVERY Page) *Rhonda L Layman*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Rhonda L Layman, President* Date *8/27/13*

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Violation Report: 42858 - 08/05/2013 - Miller-Linhart, Alden
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WEST REGION FIELD OFFICE
 Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.88(a) - Floors, walls, ceilings, windows, doors and other surfaces must be clear of debris and free of hazards.

2a. DESCRIPTION OF VIOLATION

The entry door to room 16/17 has a hole in the lower portion of the interior surface of the door.

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.

Maintenance inspected door on 8/12/13.
 Door will need to be replaced. Door ordered
 and to be installed by Maintenance
 week of 9/2/13. Administrator or
 designee will instruct staff to report
 areas in need of repair to administrator.

9-30-13 - The administrator or designated staff person will check the home
 weekly to ensure floors, walls, ceilings, windows, doors and other
 surfaces are clean, in good repair and free of hazards. 9-12-13

Repeat Violation: No	Date(s) of Previous Violation(s):		
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 (Required on EVERY Page) *Rhonda L Layman, Pres.* Date *8/26/13*

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Violation Report: 42858 - 08/05/2013 - Miller-Linhart, Aiden
 PCH Name: RIDGEVIEW RESIDENTIAL CARE

SEP 6 2013

1. REGULATION 55 Pa.Code §2600
 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.

WEST REGION FIELD OFFICE
 Human Services Licensing

2a. DESCRIPTION OF VIOLATION

There was no thermometer in the small refrigerator located in the food storage 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.

Thermometer was placed in small refrigerator ON 8/5/13. Administrator will ensure that all freezers / Refrigerators have thermometers.

8-30-13 - The Administrator or designated staff person will check all refrigerators and freezers to ensure compliance with regulation 2600.103f. 8-12-13

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Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Rhonda L. Layman, Pres.</i>	Date <i>8/26/13</i>
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Violation Report: 42858 - 08/05/2013 - Miller-Linhart, Alden
 PCH Name: RIDGEVIEW RESIDENTIAL CARE

SEP 6 2013

1. REGULATION 55 Pa.Code §2600

2600.125(a) - Combustible and flammable materials may not be located near heat sources.

WEST REGION FIELD OFFICE
 Human Services Licensing

2a. DESCRIPTION OF VIOLATION

There is a water heater located in the food storage area on the lower level of the home. There are shelving units with packaged bags of noodles, paper products, and cardboard trays containing packaged foods that are stored within three feet of the water heater. There was a chest of drawers positioned within three feet of the water heater.

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.

On 8/13 - Chest of drawers moved more than 3 feet from water heater. Canned goods were placed on shelving nearest water heater and packaged bags were moved to other area of shelving greater than 3 feet from water heater. Administrator will instruct staff not to place any combustible/flammable materials back in this area. Note the water heater is electric.

9-30-13 - The Administrator or designated staff person will check the home at least weekly to ensure compliance with regulation 2600.125A. 9-12-13

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SEP 6 2013

1. REGULATION 55 Pa.Code §2600

WEST REGION FIELD OFFICE
Human Services Licensing

2600.144(c)(1) - Proper safeguards inside and outside of the home to prevent smoking, including providing fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the home, extinguishing procedures, fire resistant furniture both inside and outside the home and fire extinguishers in the smoking rooms.

2a. DESCRIPTION OF VIOLATION

The home's designated smoking area the swing end of the front porch contained chairs with removable cushions that have labels confirming that they do not meet the required standards for fire safety.

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.

8/6/13 - Cushioned chairs were removed from designated smoking area. Resin chairs are in smoking area with commercial smoking receptacle. Staff was instructed NOT to move cushioned chairs in to smoking area on 8/7/13.

9-30-13 - The administrator or designated staff person will check daily to ensure the home's smoking policy and procedures are being followed and compliance with regulation. 2600.144(c) is met. 9-12-13.

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