



NOV 07 2014

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

RE: Ridgeview Residential Care
License #: 428580

Dear Ms. Layman:

As a result of the Department of Public Welfare's licensing inspection on August 4, 2014 and August 8, 2014, 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 must be maintained.

Your regular license for the period November 6, 2014 to November 6, 2015 was issued on July 30, 2014. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink that reads "Matthew J. Jones". The signature is written in a cursive style.

Matthew J. Jones
Director */s/*

Enclosure
License Inspection Summary

Violation Report: 42858 - 08/04/2014 - Cutter, Jan
PCH Name: RIDGEVIEW RESIDENTIAL CARE

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.17 - Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

2a. DESCRIPTION OF VIOLATION

The resident privacy coding document was attached to the violation report, dated 8/5/2013, which was posted on the bulletin board near the front 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.

Coding document was removed during inspection.
Admin. will ensure that coding document is removed prior to posting Violation Report.

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

Date 10/27/14

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

The above plan of correction is approved as of 11-3-14
(Date)

Plan of correction implementation status as of 11-3-14
(Date)

The above plan of correction was approved by *RL*
(Initials)

- Fully Implemented *JSP*
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Rhonda Layman 10/27/14

OCT 30 2014

WEST REGION FIELD OFFICE
Human Services Licensing

Violation Report: 42858 - 08/04/2014 - Cutter, Jan
PCH Name: RIDGEVIEW RESIDENTIAL CARE

1. REGULATION 55 Pa.Code §2600

2600.42(q) - A resident shall be compensated in accordance with State and Federal labor laws for labor performed on behalf of the home.

2a. DESCRIPTION OF VIOLATION

Residents #1 and #2 fold towels and resident's bed clothes. The home does not compensate the residents for their work in accordance with State and Federal labor laws.

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.

Residents are not compelled to fold laundry on behalf of the home. The residents that fold laundry request to assist with this as they enjoy doing it. Staff will do folding of laundry with residents who wish to participate as a therapeutic activity. We are considering applying for a waiver to allow residents to fold laundry with consent of the resident and family.

Within 30 days of receipt of the approved plan of correction all staff persons will be educated that any resident performing labor on behalf of the home, including any task that would otherwise have to be completed by a staff person, must be compensated in accordance with State and Federal labor laws. Documentation shall be kept. JLP 11-3-14

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* Date *10/22/14*

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The above plan of correction is approved as of 11-3-14
(Date)

Plan of correction implementation status as of 11-3-14
(Date)

- Fully Implemented
- Partially Implemented - Adequate Progress *JLP*
- Partially Implemented - Inadequate Progress
- Not Implemented

The above plan of correction was approved by JLP
(Initials)

Rhonda Layman 10/22/14

OCT 30 2014

WEST REGION FIELD OFFICE
Human Services Licensing

Violation Report: 42858 - 08/04/2014 - Cutter, Jan
PCH Name: RIDGEVIEW RESIDENTIAL CARE

1. REGULATION 55 Pa.Code §2600

2600.88(a) - Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

Approximately 4 feet from the front door the carpeting is beginning to bunch up, posing a potential tripping hazard

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 person looked at carpet and was unable to fix. Stouts Carpet was contacted on 10/20/14. Estimated time of 2 weeks to have carpet stretched.

Within 30 days of receipt of the approved plan of correction, all staff persons will be educated on reporting and correcting any floors, walls, ceilings and other surfaces that are not clean, not in good repair, or are hazardous. Documentation of education shall be kept. JSP 11-3-14

Within 30 days of receipt of the approved plan of correction, the administrator will check the home at least monthly to ensure floors, walls, ceilings, windows, doors and other surfaces are clean, in good repair and free of hazards. JSP 11-3-14

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

Date

10/27/14

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Rhonda Layman 10/27/14

Violation Report: 42858 - 08/04/2014 - Cutter, Jan
PCH Name: RIDGEVIEW RESIDENTIAL CARE

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600
2600.95 - Furniture and equipment must be in good repair, clean and free of hazards.

2a. DESCRIPTION OF VIOLATION

There was a crack exposing a sharp edge running completely across the large round mirror hanging at the bend of the back stairwell with the chair glide.

There was a 2 inch tear in the vinyl exposing the padding and a 1/8 inch round hole on the back of the seat of the chair glide in the stairwell next to the dining room.

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.

Mirror was removed ON 8/11/14.

Vinyl tape was applied to the chair glide seat while inspectors were in the home. JPP 11-3-14

Within 30 days of receipt of the approved plan of correction, all staff persons will be educated on reporting and/or correcting furniture and equipment that is not in good repair, not clean or hazardous. Documentation of education shall be kept. JPP 11-3-14

Within 30 days of receipt of the approved plan of correction, the administrator will check the home at least 2x a month to ensure furniture and equipment is in good repair, clean and free of hazards. JPP 11-3-14

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* Date *10/27/14*

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Rhonda Layman 10/27/14

OCT 30 2014

WEST REGION FIELD OFFICE
Human Services Licensing

Violation Report: 42858 - 08/04/2014 - Cutter, Jan

PCH Name: RIDGEVIEW RESIDENTIAL CARE

1. REGULATION 55 Pa.Code §2600

2600.103(i) - Outdated or spoiled food or dented cans may not be used.

2a. DESCRIPTION OF VIOLATION

There was a container of peach Activia yogurt with expiration date of 6/10/2014 and a bottle of Thousand Island dressing with best used by date of 12/11/2013 in the two door silver refrigerator in the kitchen.

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.

Yogurt was brought in by family member for a resident. Staff was reminded to check expiration dates on food brought in by family. The Thousand Island dressing was not in refrigerator. It was unopened and in storage cabinet in kitchen. All expiration dates are checked by staff before opening.

Repeat Violation: No

Date(s) of Previous Violation(s):

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(Required on EVERY Page)

Rhonda L. Layman

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page)

Rhonda L. Layman

Date

10/27/14

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(Initials)

Rhonda Layman 10/27/14

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Violation Report: 42858 - 08/04/2014 - Cutter, Jan
PCH Name: RIDGEVIEW RESIDENTIAL CARE

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600
2600.121(a) - Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

2a. DESCRIPTION OF VIOLATION
There was a very large rhododendron bush partially obstructing the fire exit #4 by about 1 and 1/2 feet.

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 rhododendron bush was cut back on 8/5/14.
The branches were not obstructing the exit.
The admin. will make sure the branches do not grow out into the path of THE EXIT.

Within 30 days of receipt of the approved plan of correction, all staff persons will be educated on maintaining stairways, hallways, doorways, passageways and egress routes from rooms and from the building unlocked and unobstructed. Documentation of education will be kept. JSP 11-3-14

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* Date *10/27/14*

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(Initials)

Plan of correction implementation status as of 11-3-14
(Date)

Fully Implemented *JSP*
 Partially Implemented - Adequate Progress
 Partially Implemented - Inadequate Progress
 Not Implemented

Rhonda Layman 10/27/14

OCT 30 2014

Violation Report: 42858 - 08/04/2014 - Cutter, Jan
PCH Name: RIDGEVIEW RESIDENTIAL CARE

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

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

2a. DESCRIPTION OF VIOLATION

There was an accumulation of dust, dryer sheets and a cloth behind the third dryer in the laundry room.

There was a cardboard box and a ceiling light fixture up against the hot water tank.

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 area behind the dryer was cleaned on 8/5/14. The box and light fixture were removed from the area. Staff was instructed on keeping the area behind the washers and dryers clean as well as not putting items within 3 feet of hot water tank. (The hot water tank is electric.)

Within 30 days of receipt of the approved plan of correction, the administrator will check the home at least monthly to ensure combustible or flammable materials are not near heat sources. JPP 11-3-14

Within 30 days of receipt of the approved plan of correction, all staff persons will be educated concerning keeping combustible or flammable materials away from heat sources. Documentation of the training will be kept. JPP 11-3-14

Repeat Violation: Yes Date(s) of Previous Violation(s): 08/05/2013

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* Date *10/27/14*

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- Partially Implemented - Inadequate Progress
- Not Implemented

Rhonda Layman 10/27/14

Violation Report: 42858 - 08/04/2014 - Cutter, Jan
PCH Name: RIDGEVIEW RESIDENTIAL CARE

OCT 30 2014

1. REGULATION 55 Pa.Code §2600
2600.125(b) - Combustible materials shall be inaccessible to residents.

WEST REGION FIELD OFFICE
Human Services Licensing

2a. DESCRIPTION OF VIOLATION

There were 2 cans of Kilz Upshot stain sealer in the closet in the downstairs livingroom with manufacturer's label indicating "Dangerous: extremely flammable will irritate eyes, skin and respiratory tract".

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 cans were removed on 8/4/14 and were locked in storage area. Staff was instructed on the need to keep hazardous materials in locked storage room.

Within 30 days of receipt of the approved plan of correction, all staff persons will be educated that combustible and flammable materials shall be inaccessible to residents. Documentation of education will be kept. JLP 11-3-14

Within 30 days of receipt of the approved plan of correction, the administrator will check the home at least weekly to ensure combustible and flammable materials shall be inaccessible to residents. JLP 11-3-14

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

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10/27/14

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Rhonda Layman 10/27/14

OCT 30 2014

Violation Report: 42858 - 08/04/2014 - Cutter, Jan
PCH Name: RIDGEVIEW RESIDENTIAL CARE

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.144(c) - A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures that include 2600.144(c)1-3.

2a. DESCRIPTION OF VIOLATION

The home permits smoking on the swing at the end of the front porch. The home has not developed written fire safety procedures to ensure safe smoking practices.

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.

Smoking is only permitted at end of porch where commercial smoking receptacle is located as well as (2) non flammable chairs. Smoking policy was added to policy & procedure manual. Previously was only in resident contract.

Within 30 days receipt of the approved plan of correction, all staff persons will be educated on the home's policy in regards to smoking. Documentation of education shall be kept. JSP 10-3-14

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

Date 10/27/14

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(Date)

Plan of correction implementation status as of 11-3-14
(Date)

- Fully Implemented
- Partially Implemented - Adequate Progress *JSP*
- Partially Implemented - Inadequate Progress
- Not Implemented

The above plan of correction was approved by JSP
(Initials)

Rhonda L. Layman 10/27/14

OCT 30 2014

Violation Report: 42858 - 08/04/2014 - Cutter, Jan
PCH Name: RIDGEVIEW RESIDENTIAL CARE

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.162(c) - Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

2a. DESCRIPTION OF VIOLATION

The current and last week's menus were posted.

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 ^{1 week} advance menu was completed but had not been posted. Admin. posted advance week menu on 8/8/14 and will ensure that advance menus are posted weekly.

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

Date

10/27/14

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(Date)

Plan of correction implementation status as of 11-3-14
(Date)

- Fully Implemented
- Partially Implemented - Adequate Progress *RLP*
- Partially Implemented - Inadequate Progress
- Not Implemented

The above plan of correction was approved by *RLP*
(Initials)

Rhonda L. Layman 10/27/14

Violation Report: 42858 - 08/04/2014 - Cutter, Jan
PCH Name: RIDGEVIEW RESIDENTIAL CARE

OCT 20 2014

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600
2600.187(d) - The home shall follow the directions of the prescriber.

2a. DESCRIPTION OF VIOLATION

Staff person A administered the wrong insulin to resident #3 on 7/16/2014 at approximately 9:00 AM. The resident received 70 units of Novolog instead of 70 units of Humalin as ordered at breakfast. At 11:00 AM, the resident was sweating and confused. His/her blood glucose was checked and was very low at 34. The resident was transported to the hospital for treatment and then returned to the home.

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.

Admin. had meeting with all med staff on 7/17/14 to discuss new policy of all insulin being checked by a second person for correct name, time, insulin type and dosage.

Within 30 days of receipt of the approved plan of correction, the administrator will monitor the medication administration record and the administration of resident medication, including insulin, at least 2x's a month to ensure the orders of the prescriber is being followed. Documentation will be kept. JSP 11-3-14

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 Date 10/27/14

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Plan of correction implementation status as of 11-3-14 (Date)

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

Rhonda L. Layman 10/27/14

Violation Report: 42858 - 08/04/2014 - Cutter, Jan	WEST REGION FIELD OFFICE
PCH Name: RIDGEVIEW RESIDENTIAL CARE	Human Services Licensing

1. REGULATION 55 Pa.Code §2600
 2600.224(a) - A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

2a. DESCRIPTION OF VIOLATION

The pre-admission screening, dated 2/21/2014, for resident # 4, did not include Medical, Psychological and Behavioral diagnoses.

The pre-admission screening, dated 4/21/2014, for resident # 5, did not include Medical, Psychological and Behavioral diagnoses.

The pre-admission screening, dated 3/7/2014, for resident # 6, did not include Medical, Psychological and Behavioral diagnoses.

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.

Pre-admission screenings were completed on 8/11/14. Admin. and designee discussed pre-admission screenings that were not complete. Admin. will ensure that all pre admission screenings are completed.

Within 30 days of receipt of the approved plan of correction, the administrator will review all resident records to ensure all resident's have a preadmission screening completed, including the medical, psychological and behavioral diagnoses and is present in each resident file. JPP 11-3-14

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) <i>Rhonda L. Layman</i>	Date <i>10/27/14</i>
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The above plan of correction was approved by <u>JPP</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>JPP</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

10/27/14 Rhonda Layman

OCT 30 2014

Violation Report: 42858 - 08/04/2014 - Cutter, Jan

PCH Name: RIDGEVIEW RESIDENTIAL CARE

WEST REGION FIELD OFFICE
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.251(b) - The entries in a resident's record shall be permanent, legible, dated and signed by the staff person making the entry.

2a. DESCRIPTION OF VIOLATION

White-out was used on resident #4's contract to change the amount of the monthly charge and to change the signature date.

White-out was used on resident #4's pre-admission screening to change the date that the form was completed

White-out was used on resident #5's medical evaluation to change the date of birth and weight.

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.

Designer who completed forms was informed of use of white-out on several documents. No white out will be used on any forms in the future.

Within 30 days of receipt of the approved plan of correction, the administrator will randomly audit resident records at least 1x per month to ensure no white-out has been used. JHP 11-3-14

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
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Rhonda L. Layman

Date 10/27/14

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Rhonda Layman 10/27/14