



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

CERTIFIED MAIL – RETURN RECEIPT REQUESTED
MAILING DATE: January 8, 2015

Mr. Jim Roberts, Director
Christian Residential Opportunities &
Social Services Inc
712 Pinola Road
Shippensburg, Pennsylvania 17257

RE: Griffith House
1345 Apple Way
St. Thomas, Pennsylvania 17252
363350

Dear Mr. Roberts:

As a result of the Department of Human Services' licensing inspection on September 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.

Sincerely,

A handwritten signature in black ink that reads "Jaime Erb". The signature is written in a cursive, flowing style.

Jaime Erb
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

Violation Report: 36335 - 09/08/2014 - Riel, Becky
PCH Name: GRIFFITH HOUSE

1. REGULATION 55 Pa.Code §2600

2600.42(b) - A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

2a. DESCRIPTION OF VIOLATION

On 9/2/2014, Staff Person A transported Resident #1 along with other residents of the home to their day program. Unknown to Staff Person A, Resident #1 never exited the home's van and entered the program. Staff Person A returned the van to the facility at approximately 9am. At approximately 3pm, Staff Person B discovered Resident #1 still in the van when planning to pick up the residents from the day program. Resident #1 had been in the home's van for approximately 6 hours on a hot and humid day.

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.

- ① Staff Development on the dangers of routine tasks that can get us into trouble due to the routine nature of the task (Medications, Head counts, fire drill, etc.) Completed Sept 10, 14
- ② All workers will be reminded that they are to stand by the door of the VAN and assist in loading and unloading of residents as well as conducting a head count. See Attached Memo.

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

Signature of Legal Entity Representative
 (Required on EVERY Page) *Jim Roberts*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Jim Roberts, Director Date Sept 11, 14

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

The above plan of correction is approved as of 9/2/14
 (Date)

The above plan of correction was approved by [Signature]
 (Initials)

Plan of correction implementation status as of 9/2/14
 (Date)

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