



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

SEP 25 2015

Ms. Darlene Weaver, PCH Administrator  
Richland Christian Home, Inc.  
719 East Lincoln Avenue  
Myerstown, Pennsylvania 17067

RE: Richland Christian Home  
License #: 328910

Dear Ms. Weaver:

As a result of the Department of Human Services' licensing inspection on July 28, 2015 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 August 23, 2015 to August 23, 2016 was issued on May 7, 2015. Your regular license remains in good standing.

Sincerely,

Matthew J. Jones  
Director <sup>15H</sup>

Enclosure  
License Inspection Summary



Violation Report: 32891 - 07/28/2015 - McCloskey, Jason  
 PCH Name: RICHLAND CHRISTIAN HOME

1 REGULATION 55 Pa.Code §2600

2600.42(s) - A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.

2a. DESCRIPTION OF VIOLATION

The bedrooms occupied by Residents 1 and 2 contain audio monitoring devices which, according to interview of Staff Person A, are used to monitor the residents in case they fall or verbally request assistance from staff. Staff Person A states that the unit for Resident 1 is left on throughout the day while the unit in Resident 2's bedroom is turned on overnight.

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.

Resident 1, [REDACTED], her general health status has improved. She no longer requires direct supervision, due to health improvement.

Resident 2, [REDACTED], no longer requires the audio monitoring device, because staff is monitoring her more frequently, and the physician has become more involved with her health needs.

We no longer use any audio monitoring devices. We do not plan for any future use.

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

Signature of Legal Entity Representative (Required on EVERY Page) *Darlene Weaver PCHA*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Darlene Weaver PCHA*      Date *8/12/15*

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

The above plan of correction is approved as of 8/13/15 (Date)

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

Plan of correction implementation status as of 8/13/15 (Date)

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