



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

OCT 25 2017

Ms. Sharon Hoke,  
VP of PC, IL, Corporate Compliance  
Stoneridge Retirement Living  
450 East Lincoln Avenue  
Myerstown, Pennsylvania 17067

RE: Stoneridge Poplar Run  
Certificate #: 308990

Dear Ms. Hoke:

As a result of the Department of Human Services' annual licensing inspection on August 15, 2017 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.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to [https://www.surveymonkey.com/r/BHSL\\_Inspection](https://www.surveymonkey.com/r/BHSL_Inspection).

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink that reads "J. Rowe".

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary

**VIOLATION REPORT**  
**PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

PCH Name: STONERIDGE POPLAR RUN		License Number: 30899
Address: 450 EAST LINCOLN AVENUE, MYERSTOWN, PA 17067		County: Lebanon
Administrator: SHARON HOKE		Region: CENTRAL
Legal Entity Name: STONERIDGE RETIREMENT LIVING		
Legal Entity Address: 440 EAST LINCOLN AVENUE, MYERSTOWN, PA 17067		
<b>Certificate(s) of Occupancy</b>		
C-1 11/04/1993 Department of Health		
<b>Staffing Hours</b>		
Resident Support: NM	Total Daily Staff: 26	Working Staff: 20
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
<b>Reason(s) for Inspection(s)</b>		
Renewal, Incident		
<b>On-Site Inspections Dates and Department Representatives On-Site</b>		
08/15/2017: OPake, Hope; Showers, Michael		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b>		
<p><b>RECEIVED</b></p> <p>AUG 21 2017</p> <p>CENTRAL REGION FIELD OFFICE Human Services Licenses</p>		
<b>Other Details</b>		
Partial or Full Triggers:	Random Indicators:	
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 36 Number of Residents Served: 26 Secured Dementia Care Unit in Home: No Area: Secured Dementia Unit Capacity, if Applicable: Number of Residents Served in Secured Dementia Care Unit, if applicable: Number of Current Hospice Residents: 1 Number of Hospice Residents in past year: 2	<b>Number of Residents who:</b> Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 26 Have Mental Illness: 1 Have an Intellectual Disability: 0 Have a Mobility Need: 0 Have a Physical Disability: 0	

Violation Report: 30899 - 08/15/2017 - OPake, Hope

PCH Name: STONERIDGE POPLAR RUN

**1. REGULATION 55 Pa.Code §2600**

2600.105(g)(1) - To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use.

**2a. DESCRIPTION OF VIOLATION**

On August 15, 2017, there was an accumulation of lint in the lint trap of the Speed Queen Commercial Dryer in the utility 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.*

Lint was immediately removed from the lint trap at the time found. Team members will be re-educated to check the lint trap when they unlock the laundry room door to allow residents entry to remove their laundry from the dryer. The policy will also continue to check the lint trap each shift. The PC Administrator will check compliance weekly for 4 weeks, then monthly for 2 months, then spot check periodically when compliance has been achieved and sustained. Team members educated on the above by the PC Administrator on 8/31/2017.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) Sharon Hoke

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Sharon Hoke, RN, NHA PC Administrator Date 8/31/2017

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

The above plan of correction is approved as of 8-31-17 (Date)

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

Plan of correction implementation status as of 8-31-17 (Date)

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

Violation Report: 30899 - 08/15/2017 - OPake, Hope

PCH Name: STONERIDGE POPLAR RUN

**1. REGULATION 55 Pa.Code §2600**

2600.225(a) - A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

**2a. DESCRIPTION OF VIOLATION**

Resident #1 was admitted on [REDACTED] 2016. The initial assessment was completed on [REDACTED] 2016.

**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.*

PC Administrator audited PC resident charts to determine compliance. Excel audit tool developed and will be utilized by PC Administrator to assure RASPs are completed timely. PC LPN will also utilize the excel audit tool to monitor when RASPs are due as new residents will be added to the form at time of admission.

PC Administrator will review the RASP schedule with the PC LPN at the start of each month to assure scheduling of timely completion. PC Administrator will monitor completion of each RASP on an ongoing basis.

PC LPN educated on the above on 8/31/2017

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