



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

NOV 05 2018

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's Bureau of Human Services Licensing annual inspection on August 8, 2018, and the corrections you have made after our inspection, we have found the above facility to be in compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes).

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: 30899 - 08/08/2018 - Hoover, Douglas  
 PCH Name: STONERIDGE POPLAR RUN

**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 home has video recording cameras throughout the building. Specifically, the doorways to Resident Rooms #227 and #247 are under recorded video surveillance. There are no signs in the home identifying those areas under video surveillance.

**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.*

All cameras in the home were adjusted and any areas that could see room doors were blocked out. Common area view was also narrowed and sofas blocked out. Signs were ordered for each area where a camera is located and will arrive October 5.

Signage was installed on 10/10/18, indicating areas under video surveillance. The home will ensure that the right to privacy of self and possessions is protected.- GE

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)

*Courtney Nielson LPA PCHA*

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

*Courtney Nielson LPA PCHA*

Date *9/26/2018*

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

The above plan of correction is approved as of 9/28/18  
 (Date)

Plan of correction implementation status as of 10/30/18  
 (Date)

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

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