

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY PUBLIC

January 17, 2023

[REDACTED], PERSONAL CARE HOME ADMINISTRATOR
RICHLAND CHRISTIAN HOME, INC
[REDACTED]
[REDACTED]

RE: RICHLAND CHRISTIAN HOME
211 SOUTH RACE ST
RICHLAND, PA, 17087
LICENSE/COC#: 32891

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/20/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: *RICHLAND CHRISTIAN HOME* License #: *32891* License Expiration: *08/23/2023*
 Address: *211 SOUTH RACE ST, RICHLAND, PA 17087*
 County: *LEBANON* Region: *CENTRAL*

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: *RICHLAND CHRISTIAN HOME, INC*
 Address: [Redacted]
 Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Type: *I-2* Date: *07/11/2014* Issued By: *Lebanon County*
 Type: *I-2* Date: *06/24/2011* Issued By: *Richland Boro*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *24* Waking Staff: *18*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal* Exit Conference Date: *12/20/2022*

Inspection Dates and Department Representative

12/20/2022 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *23* Residents Served: *20*

Secured Dementia Care Unit
 In Home: *No* Area: Capacity: Residents Served:

Hospice
 Current Residents: *2*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *20*
 Diagnosed with Mental Illness: *4* Diagnosed with Intellectual Disability: *1*
 Have Mobility Need: *4* Have Physical Disability: *1*

Inspections / Reviews

12/20/2022 Full
 Lead Inspector: [Redacted] Follow-Up Type: *POC Submission* Follow-Up Date: *01/06/2023*

01/06/2023 - POC Submission
 Submitted By: [Redacted] Date Submitted: *01/13/2023*
 Reviewer: [Redacted] Follow-Up Type: *POC Submission* Follow-Up Date: *01/13/2023*

Inspections / Reviews *(continued)*

01/13/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 01/13/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 01/20/2023

01/17/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/13/2023

Reviewer: [REDACTED]

Follow Up Type: Not Required

183b Meds and Syringes Locked

1. Requirements

2600.

183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

Description of Violation

On [redacted] at approximately [redacted] [redacted] were unlocked, unattended and accessible in Resident #1's bedroom; Resident #1's bedroom was unlocked at the time.

Plan of Correction

Directed [redacted] - 01/13/2023)

On 1/3/23, all direct care staff in the home were re-trained on medications being secured per their RASP by the administrator.

Beginning on 1/9/23, direct care staff will scan resident's bedrooms to ensure all medications are secured.

Beginning on 1/12/23, the administrator will perform room checks on a monthly basis to ensure medications in the rooms are locked up between administration times.

See attached.

(Directed)

- On 12/20/22 immediately after the violation was made known, the resident care manager, made sure the medications were locked in Resident #1's bedroom.
- On 12/22/22, the administrator, made sure resident #1's medications were appropriately locked up. Resident #1 was also instructed to make sure his/her cabinet stays locked. Resident #1 demonstrated he/she understood by showing the administrator where he/she puts the keys after his/her lock box is secured.
- A notice of the violation was posted on the staff bulletin board to inform caregivers/med techs of the violation.
- On 1/3/23, the administrator. entered Resident #1's room again and found the medications appropriately locked. Also, a message was sent to each caregiver/med tech informing them of the need to make sure that every medication is appropriately locked including the ones that residents self-administer in their rooms.
- Beginning on 1/9/23, direct care staff will scan resident's bedrooms daily to ensure all medications are secured.
- Beginning on 1/12/23, the administrator will perform room checks on a monthly basis to ensure medications in the rooms are locked up between administration times.
- On 1/3/23, all direct care staff in the home were verbally re-trained on medications being secured per their RASP by the administrator. Staff signed the staff attendance sheet for the training by 1/12/23.

Directed Completion Date: 01/12/2023

Implemented [redacted] - 01/17/2023)

185a Implement Storage Procedures

2. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

185a Implement Storage Procedures (continued)

Description of Violation

Resident's #2 and #3 are prescribed [REDACTED] topically to buttocks and peri area every shift PRN for excoriation. On [REDACTED] at approximately [REDACTED] the [REDACTED] cream was not available in the home.

Plan of Correction

Directed [REDACTED] - 01/13/2023)

On 12/21/22 the resident care manager placed an order with the pharmacy to replenish the [REDACTED] Cream that was missing.

On 1/9/23, Caregiver #1 will complete weekly medication cart audits to ensure all ordered medications are available; pharmacy will be contacted as needed if a medication is found to be unavailable.

(Directed)

- On 1/3/2023, the Administrator provided a verbal re training to all med tech's on the need to have all ordered medications available in the home. Staff members in attendance of the verbal training signed the staff attendance sheet by 1/12/23.
- On 1/3/22 a message was sent to each caregiver/ med tech by the administrator informing them of the need to make sure that every medication order has the medication available, including PRN medications.
- On 12/21/22 the resident care manager placed an order with the pharmacy to replenish the [REDACTED] Cream that was missing.
- Beginning 1/9/23, Caregiver #1 will complete weekly medication cart audits to ensure all ordered medications are available; pharmacy will be contacted as needed if a medication is found to be unavailable.

Directed Completion Date: 01/12/2023

Implemented ([REDACTED] - 01/17/2023)

227d - Support Plan Medical/Dental

3. Requirements

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

The support plan for Resident #2, dated [REDACTED], does not indicate a medical need for the use of the resident's enabler when positioned in bed.

Plan of Correction

Directed [REDACTED] - 01/13/2023)

On 12/22/22, the administrator, documented the need for, and the use of the enabler bar on a RASP addendum sheet and attached it to resident #2's RASP.

On 1/4/22 an order was received from [REDACTED], CRNP regarding the use of an enabler bar for resident #2.

On 1/5/23, the administrator searched for any other non compliance regarding enabler bar use and requested enabler bar usage orders where necessary. If any other RASPs do not include enabler bar usage, an addendum will be added as soon as the order is received. Otherwise, the enabler bar will be removed from resident's bed.

The administrator will ensure that all medical equipment usage, including... enabler bars are documented on the

227d Support Plan Medical/Dental (continued)

RASPs during the annual updates, if any status changes, or if there is new medical equipment needed.

(Directed)

- On 1/3/2023, the staff members of the home received verbal training by the administrator on notifying the administrator on changes in residents' status and addition of equipment so the RASP can be updated as needed. Staff members in attendance of the training signed the staff attendance sheet by 1/12/23.*
- Beginning 1/13/2023, the administrator will ensure that all medical equipment usage, including... enabler bars are documented on the RASPs during the annual updates, if any status changes, or if there is new medical equipment needed.*

Directed Completion Date: 01/12/2023

Implemented [REDACTED] - 01/17/2023)