

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to RIVERSTONE MANOR LLC
LEGAL ENTITY

To operate RIVERSTONE MANOR
NAME OF FACILITY OR AGENCY

Located at ONE MAIN STREET, WALNUTPORT, PA 18088
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

To provide Personal Care Homes
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 72
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.
(MAXIMUM CAPACITY)

Restrictions: _____

This certificate is granted in accordance with the Public Welfare Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from November 9, 2012 until November 9, 2013,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: 223940

Robert E. Robinson

ISSUING OFFICER

[Signature]

DIRECTOR

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.

PW 628 - 01/11



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
ROOM 631 HEALTH & WELFARE BUILDING
625 FORSTER STREET
HARRISBURG, PENNSYLVANIA 17120

ADULT RESIDENTIAL LICENSING

PHONE: (717)783-3670
FAX: (717)783-5662

CERTIFIED MAIL – RETURN RECEIPT REQUESTED

MAILING DATE: NOV 09 2012

Adam Herman, CEO, Administrator
Riverstone Manor, LLC.
P.O. Box 333
Walnutport, Pennsylvania 18088

RE: Adam Herman, CEO, Administrator
Riverstone Manor
One Main Street
Walnutport, Pennsylvania 18088

Dear Mr. Herman:

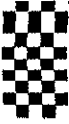
In accordance with the Settlement Agreement signed by Riverstone Manor, LLC. and the Department of Public Welfare on October 18, 2012, enclosed is a REGULAR License issued in accordance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes).

Sincerely

A handwritten signature in black ink, appearing to read 'R. Melusky', written over a horizontal line.

Ronald Melusky
Director

Enclosures:
Regular License
Violation Report
Settlement Agreement



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
BUREAU OF HEARINGS AND APPEALS

IN THE APPEAL OF: **Riverstone Manor v.
Bureau of Human Services Licensing
BHA ID No. 9999
BHA Docket No.: 034-12-0037
Personal Care Home – Revocation**

SETTLEMENT AGREEMENT

This Settlement Agreement (Agreement) is entered into this ^{18th} day of ~~October~~ 2012, by and between the Department of Public Welfare Bureau of Human Services Licensing (Department) and Riverstone Manor, LLC. (Appellant) for the purpose of resolving the matter set forth herein.

WHEREAS, the Department is the Commonwealth agency entrusted with the oversight and administration of the licensing of personal care homes (homes) in the Commonwealth of Pennsylvania;

WHEREAS, Riverstone Manor is located at One Main Street, Walnutport, Pennsylvania 18088 and is operated by Appellant as a personal care home licensed under statutes and regulations administered by the Department;

WHEREAS, by letter of August 28, 2012, Appellant was notified of the Department's decision to revoke the personal care home license for the above home and placed a ban on new resident admissions;

WHEREAS, on September 4, 2012, Appellant submitted a timely appeal;

WHEREAS, on September 19, 2012, the Department's Bureau of Hearings and Appeals (BHA) docketed appeal, number 034-12-0037, and conducted a pre-hearing conference on October 9, 2012;

WHEREAS, the Department and the Appellant both wish to resolve this matter amicably and avoid the uncertainties of further litigation of this matter;

AND,

WHEREAS, the Parties, have reached a mutually agreeable means of resolving this matter that will settle and end this appeal.

NOW, THEREFORE, the Parties, intending to be legally bound, do hereby mutually agree to the Terms of the Agreement as follows:

TERMS OF AGREEMENT

1. All terms of this Agreement shall remain in effect from the date of this Agreement, effective upon execution by the Parties, until the completion of Provision #4 of this Agreement. The execution of the documents by all Parties triggers the time period for actions in this Agreement.
2. Within fourteen (14) calendar days from the effective date of this Agreement, the Department will schedule and conduct an announced inspection at the above personal care home to determine compliance with 55 Pa.Code Ch. 2600 (relating to personal care homes).
3. Within seven (7) calendar days from the final day of the inspection conducted in accordance with Provision #2 of this Agreement, the Department will, if applicable, notify Appellant in writing of violations pursuant to 55 Pa.Code Ch. 2600 (relating to personal care homes). If applicable, Appellant will respond to violations in accordance with 55 Pa.Code § 20.52 (relating to plan of correction) within nine (9) calendar days from the mailing date indicated on the Department's letter.
4. Within fourteen (14) calendar days of the receipt of the plan of correction required pursuant to Provision #3, Appellant will be notified in writing of the Department's decision to issue or deny a certificate of compliance (license) in accordance with 55 Pa.Code § 20.51 (related to issuance) and 55 Pa.Code § 20.71 (relating to conditions for denial, nonrenewal or revocation) respectively. If no regulatory violations of 55 Pa.Code Ch. 2600 (relating to personal care homes) are identified, the Department will issue a twelve (12) month license to operate the above personal care home in accordance with 55 Pa.Code § 20.53 (relating to regular certificate of compliance). If Appellant is determined to be in substantial but not complete compliance, the Department will issue a six (6) month license to operate the above personal care home in accordance with 55 Pa.Code § 20.54 (relating to provisional certificate of compliance). The current ban on resident admission will be lifted upon the date of license issuance by the Department.
5. Appellant will disclose to the Department any and all information relating to the operation of unlicensed personal care homes upon receipt of such information or at the Department's request.
6. This Agreement shall not be construed to reduce, limit or restrict the Department's authority to enforce applicable statutes and regulations, including but not limited to 62 P.S. § 1001 et seq., 55 Pa.Code § 20.1 et seq. and 55 Pa.Code § 2600.1 et seq.

7. Any violation by Appellant of any of the terms of this Agreement or of any other applicable requirement, including but not limited to Article X of the Public Welfare Code, 62 P.S. § 1001 et seq., 55 Pa. Code § 20.1 et seq. and 55 Pa. Code § 2600.1 et seq, which is not cured within a reasonable time after notice, shall be deemed a material breach of the Agreement and the Department shall have the right to take any action determined to be appropriate; said right is subject to the Appellant's right to hearing before the Department's Bureau of Hearing and Appeals (BHA) to determine the appropriateness of the Department's action.
8. Each Party agrees that this Agreement shall not constitute an admission of wrongdoing, liability or fault by either Party.
9. Each individual signing this Agreement on behalf of a Party represents that the individual is duly authorized to sign this Agreement on behalf of the Party. The undersigned represents that each Party has obtained all necessary approvals to bind the Party she/he represents.
10. This Agreement is based upon facts unique to this case and does not establish a precedent or otherwise bind the Department in any other action and shall not be construed as evidence of Department practice, policy or interpretation with respect to any dispute or issue.
11. The effective and execution date of this Agreement is the date set forth on page one of this Agreement, which will be completed by counsel for the Department on the date the Department's counsel signs this Agreement.
12. The Parties to this Agreement agree that they have read and fully understand this Agreement. This Agreement is entered into knowingly, voluntarily and intelligently.
13. This Agreement constitutes the entire Agreement and understanding between the Parties relating to the specific matter contained herein, and supersedes any prior Agreements, whether oral or written, with respect thereto. This Agreement may not be amended or modified in any respect whatsoever except in writing duly executed by an authorized representative of each of the Parties.
14. Once this Agreement is executed, the Department shall file this Agreement with BHA, and such filing will constitute Appellant's withdrawal of its appeal, docket number 034-12-0037.
15. This Agreement is public information in accordance with 65 P.S. § 67.101 et seq.

WHEREFORE, the Parties hereby stipulate and agree to the above conditions and terms of settlement.

Ruth Silvers

Ruth Silvers, Appellant
Riverstone Manor, LLC

Date: 10/18/12

And

Adam Herman

Adam Herman, Appellant
Riverstone Manor, LLC

Date: 10/18/12

Ronald Melusky

Ronald Melusky, Director
Department of Public Welfare
Adult Residential Licensing

Date: 10/18/12

And

Megan Wiest

Megan Wiest, Counsel
Department of Public Welfare

Date: 10/18/12

Violation Report: 22394 - 11/06/2012 - Patton, Leslie
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600

2600.51 - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (OAPSA) (35 P.S. §§ 10225.101-10225.5102) and 6 Pa.Code Chapter 15 (relating to protective services for older adults).

2a. DESCRIPTION OF VIOLATION

Staff person A, who is the administrator as well as the owner, does not have a current Pennsylvania criminal background check. The most recent PA criminal background check was completed on 2/10/08, more than a year prior to the home's opening date of 8/31/12.

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.

See Attached

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

Signature of Legal Entity Representative (Required on EVERY Page) *Adam Herman*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Adam Herman Administrator* Date *11/6/12*

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

The above plan of correction is approved as of *11/7/12* (Date)

Plan of correction implementation status as of *11/7/12* (Date)

The above plan of correction was approved by *AM* (initials)

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

Riverstone Manor
One Main Street
Walnutport, Pennsylvania 18088

Plan of Correction for Regulation 2600.51

This regulation is important because it ensures that employees with prohibitive offenses do not work in personal care homes. The regulation was violated in that the administrator did not have a current criminal background check. The root cause of the violation was an unchecked date of the criminal background check in the employee file. **At the time of inspection,** a current criminal background check was ran and given to the inspector. Attached is a copy of said criminal background check with date it was ran. To prevent future violations, close attention will be paid to dates of criminal background checks and no employees will work without one. The steps for new hires including ancillary and administrative staff in regards to time sensitive paperwork will be:

- The administrator will check dates weekly after a new employee is hired in employee files as to when criminal background checks were ran, as well as other time sensitive documents.
- The administrative assistant is to act as a secondary checks and balances system for all completed time sensitive documents.
- In addition a computer prompt in the TabulaPro program will alarm to deadlines of time sensitive data entered into the system.

Signed Adam Skime

Date 11/6/12

11/7/12

Violation Report: 22364 - 11/06/2012 - Patton, Leslie
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600

2600.85(a) - Prior to or during the first work day, all direct care staff persons including ancillary staff persons, substitute personnel and volunteers shall have an orientation in general fire safety and emergency preparedness that includes the following:

- (1) Evacuation procedures.
- (2) Staff duties and responsibilities during fire drills, as well as during emergency evacuation, transportation and at an emergency location if applicable.
- (3) The designated meeting place outside the building or within the fire-safe area in the event of an actual fire.
- (4) Smoking safety procedures, the home's smoking policy and location of smoking areas, if applicable.
- (5) The location and use of fire extinguishers.
- (6) Smoke detectors and fire alarms.
- (7) Telephone use and notification of emergency services.

2a. DESCRIPTION OF VIOLATION

Volunteer staff persons B (hired 8/28/12), C (hired 8/2012) and D (hired 5/2012) received the required training. However, the training was not dated and therefore it could not be determined if the training was completed in a timely manner.

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.

See Attached

Repeat Violation: No.	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page)	<i>Adam Herman</i>
--	--------------------

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
<i>Adam Herman Administrator</i>	<i>11/6/12</i>

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

The above plan of correction is approved as of 11/7/12
(Date)

Plan of correction implementation status as of 11/7/12
(Date)

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

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

Riverstone Manor
One Main Street
Walnutport, Pennsylvania 18088

Plan of Correction for Regulation 2600.65(a)

This regulation is important because it ensures that all staff persons are immediately trained to respond to an emergency situation. The regulation was violated in that the training was not dated and therefore it could not be determined if the training was completed in a timely manner. The cause of this violation was a clerical error in not dating the staff training orientation sheets. What was done right away to fix the violation was a mandatory re-training meeting. This meeting was held November 6, 2012 starting at 0930. The training was documented, signed and dated. Attached will be a copy of all new signed and dated employee training document. To prevent this from becoming a future violation, close attention will be paid to the dating of all staff training documents by the administrator as well as the administrative assistant as secondary check to assure that the home stays in compliance. The steps for new hires including ancillary and administrative staff in regards to time sensitive paperwork will be:

- The administrator will check dates weekly after a new employee is hired in employee files as to when training was completed, as well as other time sensitive documents.
- The administrative assistant is to act as a secondary checks and balances system for all completed time sensitive documents.
- In addition a computer prompt in the TabulaPro program will alarm to deadlines of time sensitive data entered into the system.

[Handwritten signature]
11/7/12

Signed *[Handwritten signature]*

Date 11/6/12

Violation Report: 22394 - 11/05/2012 - Patton, Leslie
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600

2600.65(b) - Within 40 scheduled working hours, direct care staff persons, ancillary staff persons, substitute personnel and volunteers shall have an orientation that includes the following:

- (1) Resident rights.
- (2) Emergency medical plan.
- (3) Mandatory reporting of abuse and neglect under the Older Adult Protective Services Act (35 P.S. §§ 10225.101-10225.5102).
- (4) Reporting of reportable incidents and conditions.

2a. DESCRIPTION OF VIOLATION

Volunteer staff persons B (hired 8/23/12), C (hired 8/2012) and D (hired 5/2012) did not receive training regarding the Older Adult Protective Services Act. In addition, the training that was received was not dated and therefore it could not be determined if the training was provided in a timely manner.

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.

See Attached

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page)	<i>Adam Herman</i>
--	--------------------

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Date
<i>Adam Herman Administrator</i>	<i>11/6/12</i>

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The above plan of correction is approved as of 11/7/12
(Date)

Plan of correction implementation status as of 11/7/12
(Date)

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

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

Riverstone Manor
One Main Street
Walnutport, Pennsylvania 18088

Plan of Correction for Regulation 2600.65(b)

This regulation is important because it ensures that all staff persons working in the home are familiar with residents' rights, mandated reporting, and the procedures for responding to a medical emergency. The regulation was violated in that staff persons were not trained on paper regarding the Older Adult Protection Services Act. In addition these training documents were not dated and it could not be determined if the training was provided in a timely manner. The cause of the violation was an inadequate staff training document. What was done right away to fix the violation was a mandatory re-training meeting. This meeting was held November 6, 2012 starting at 0930. New employee training documents were drawn up and are now implemented for use in all employee files. The training was documented, signed and dated. Attached will be a copy of all new signed and dated employee training documents. To prevent this from becoming a future violation, close attention will be paid to the dating of all staff training documents. The steps for new hires including ancillary and administrative staff in regards to time sensitive paperwork will be:

- The administrator will check dates weekly after a new employee is hired in employee files as to when training was completed, as well as other time sensitive documents.
- The administrative assistant is to act as a secondary checks and balances system for all completed time sensitive documents.
- In addition a computer prompt in the TabulaPro program will alarm to deadlines of time sensitive data entered into the system.

This system and the new staff training documents will ensure the same violation will never repeat again.

Signed Adam Stern

Date 11/6/12

Violation Report: 22394 - 11/06/2012 - Pelton, Leslie
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600:

2600.83(a) - The indoor temperature, in areas used by the residents, shall be at least 70°F when residents are present in the home.

2a. DESCRIPTION OF VIOLATION

At 12:10pm on 11/5/12, the thermostat located at the entrance of the "main building" portion of the home was set at 65 degrees Fahrenheit. The temperature in the living room next to the dining room, which was being utilized, measured 59.3 degrees Fahrenheit.

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.

See Attached

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Adam Herman

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

Adam Herman Administrator

Date 11/6/12

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

The above plan of correction is approved as of

11/7/12
(Date)

Plan of correction implementation status as of

11/7/12
(Date)

Fully Implemented

Partially Implemented - Adequate Progress

Partially Implemented - Inadequate Progress

Not Implemented

The above plan of correction was approved by

[Signature]
(Initials)

Riverstone Manor
One Main Street
Walnutport, Pennsylvania 18088

Plan of Correction for Regulation 2600.83(a)

This regulation is important because it reduces the likelihood that older residents and residents with special medical needs will be medically compromised by temperature extremes. The regulation was violated in that the thermostat at the entrance of the "main building" portion of the home was set at 65 degrees Fahrenheit. The cause of the violation was the improper setting of the thermostat during colder weather. The 3 residents live in the other building but still have to pass through this room to get to the dining room for meals. The living room temperature measured 59.3 degrees Fahrenheit. The cause of this violation was the setting of the thermostat. This was **corrected at the time of inspection** by turning up the thermostat to 70 degrees Fahrenheit to fix the problem immediately. In addition the 3 residents were served dinner in the already adequately heated common area of the North wing until inside temperatures adjusted. To prevent future violations the thermostat will remain at 70 degrees Fahrenheit during cold weather. Steps to prevent this will be

- Staff will be made aware of the temperature guidelines of comfortable temperatures between 70 and 80 degrees Fahrenheit for residents during orientation.
- All staff will check the thermostat to assure comfortable temperatures so this can never be a repeat violation.
- All thermostats with exception of those in common areas and private bedrooms are locked in a case. These thermostats will also be set at 70 degrees Fahrenheit.

Signed Adrian Kline

Date 11/6/12

[Handwritten signature]
11/7/12

Violation Report: 22394 - 11/06/2012 - Patton, Leslie
PCH Name: RIVERSTONE MANOR

Page 6 of 13

1. REGULATION 55 Pa.Code §2600
2600.86(b) - A bathroom that does not have an operable, outside window shall be equipped with an exhaust fan for ventilation.

2a. DESCRIPTION OF VIOLATION

The ceiling fan located in bathroom #3 in the "gingerbread" section of the home was found to be inoperable.

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.

See Attached

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

Signature of Legal Entity Representative (Required on EVERY Page) *Adam Herman*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Adam Herman Administrator Date 11/6/12

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

The above plan of correction is approved as of 11/7/12 (Date)

Plan of correction implementation status as of 11/7/12 (Date)

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

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

Riverstone Manor
One Main Street
Walnutport, Pennsylvania 18088

Plan of Correction for Regulation 2600.86(b)

This regulation is important because good air circulation in bathrooms helps to prevent the build-up of mold, mildew, odor and clears dust from the air. The regulation was violated because the exhaust fan in bathroom #3 was found to be inoperable. The cause of the violation was a burnt out motor mechanism in the fan. What was done right away to fix the problem was the purchase and installation of a new exhaust fan/light took place November 6, 2012. Attached to this document will be a receipt of purchase and picture of the newly installed fixture to act as proof that this violation has been corrected. To prevent future violations the following steps will be followed:

- All cleaning staff will check the function of the exhaust fans while cleaning the bathrooms daily.
- Staff will record any and all malfunctioned equipment on the Maintenance Log located in the employee lounge.
- This log will be checked daily by the Administrative Assistant.
- All repairs will be brought before the Administrator for approval to ensure the equipment is repaired in a timely manner.

Signed

Adam Harnoi

11/7/12

Date

11/6/12

Violation Report: 22394 - 11/05/2012 - Patton, Leslie
 PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600
 2600.123(b) - Copies of the emergency procedures as specified in § 2600.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.

2a. DESCRIPTION OF VIOLATION
 The home's emergency preparedness plan and the emergency preparedness plan for the municipality in which the home is located were not posted.

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.

See Attached

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Adam Herman*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Adam Herman Administrator</i>	Date <i>11/6/12</i>
--	------------------------

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

The above plan of correction is approved as of <u>11/7/12</u> (Date)	Plan of correction implementation status as of <u>11/7/12</u> (Date)
The above plan of correction was approved by <u><i>M</i></u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Riverstone Manor
One Main Street
Walnutport, Pennsylvania 18088

Plan of Correction for Regulation 2600.123(b)

This regulation is important because posting the required information allows for easy access to critical information by laypersons during an emergency. The regulation was violated in that the home's emergency preparedness plan and the emergency preparedness plan for the municipality in which the home is located were not posted. The cause of the violation was that the plans were not posted in a conspicuous area. This was **corrected at the time of inspection** by photo copying the existing plans that are already kept in the med room and file room and placing them in a binder and leaving this binder on the resident and visitor check in desk in the common area of the North Wing. To prevent future violations the administrator and staff will perform daily checks while doing rounds to make sure that binders are present and visible to laypersons on the desk.

Signed Adam Herman

Date 11/6/12

M
11/7/12

Violation Report: 22394 - 11/05/2012 - Patton, Leslie
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600

2600.124 - The home shall notify the local fire department in writing of the address of the home, location of the bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.

2a. DESCRIPTION OF VIOLATION

The home did not notify the local fire department of the assistance that would be needed in the event emergency evacuation was needed.

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.

See Attached

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Adam Herman*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Adam Herman Administrator* Date *11/6/12*

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

The above plan of correction is approved as of *11/7/12*
(Date)

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

Plan of correction implementation status as of *11/7/12*
(Date)

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

Riverstone Manor
One Main Street
Walnutport, Pennsylvania 18088

Plan of Correction for Regulation 2600.124

This regulation is important because in the event of a fire or other emergency, the local fire department will usually arrive within a matter of minutes. Having advanced knowledge of the layout of the home and the needs of the residents will help the fire department evacuate residents quickly. The regulation was violated in that the home did not notify the local fire department of the assistance that would be needed in the event emergency evacuation that was needed in which there are none. The cause of the violation is that there was not a letter given to the fire department informing them of layout plans of the home and that there are no mobility needs for the residents at this time. What was done right away to fix the violation was to write a letter to the fire department including layout plans and explaining that there are no mobility needs for our residents at this time and that we will inform them of future resident mobility issues if any. Attached is a copy of the letter sent to the fire department as well as the layout plans that were sent. To prevent future violations, mobility of our residents will be checked during assessments and if there are any mobility needs, the administrator will inform the fire department with a description of what type of mobility need there is.

Handwritten signature
11/7/12

Signed *Adam Heiman*

Date 11/6/12

Violation Report: 22384 - 11/06/2012 - Patton, Leslie
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600

2600.131(a) - There shall be at least one operable fire extinguisher with a minimum 2-A rating for each floor, including the basement and attic.

2a. DESCRIPTION OF VIOLATION

A fire extinguisher was not present in the attic of the "main building" portion of the home.

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.

See Attached

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Adam Herman*

Printed Name and Title of Legal Entity Representative Date
(Required on EVERY Page) *Adam Herman Administrator* *11/6/12*

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

The above plan of correction is approved as of *11/7/12*
(Date)

Plan of correction implementation status as of *11/7/12*
(Date)

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

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

Riverstone Manor
One Main Street
Walnutport, Pennsylvania 18088

Plan of Correction for Regulation 2600.131(a)

This regulation is important in that easily accesible fire extinguishers offer staff and residents the opportunity to extinguish fires before they spread. The regulation was violated by the lack of fire extinguisher present in the locked attic of the main building. The cause of violation was the lack of fire extinguisher in the locked attic of the main building. To fix the violation immediately a new 2-A rating fire extinguisher was purchased and installed in the locked attic of the main building on November 6, 2012. Attached is a copy of the receipt for the new fire extinguisher and a picture of its location in the locked attic of the main building of the home. To prevent future violations monthly checks will be done to make sure that all fire extinguishers are accounted for and in the appropriate required places. The administrator will be responsible for the monthly checks on the same day as fire drills.

Signed Adam Huma

✓
11/7/12

Date 11/6/12

Violation Report: 22394 - 11/05/2012 - Patton, Leslie
FCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa. Code §2600
2800.141(a)(2) - The medical evaluation must include the following: (1) through (10)

2a. DESCRIPTION OF VIOLATION
The medical evaluation in the record of resident #1(dated 8/18/12) was incomplete as all areas were left blank except for the name of the resident, date of birth, sex, height, blood pressure, physician signature and physician's medical number.
A more recent medical evaluation (dated 10/8/12) in the record of resident #1 was not completed in its entirety as the resident's cognitive functioning and body positioning needs, if any, were not addressed. Also, the medical evaluation stated "see attached" regarding medications however, a list of medications was not present.

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.

See Attached

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Adam Herman*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Adam Herman Administrator* Date *11/6/12*

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

The above plan of correction is approved as of <u>11/7/12</u> (Date)	Plan of correction implementation status as of <u>11/7/12</u> (Date)
The above plan of correction was approved by <u><i>M</i></u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Riverstone Manor
One Main Street
Walnutport, Pennsylvania 18088

Plan of Correction for Regulation 2600.141(a)(2)

This regulation is important so that accurate medical information is maintained to help the home decide whether a residents needs can be met at the home, this information also helps the home develop accurate asesment and support plans, and ensures that resident's medical needs will be met. The regulation was violated in that the Medical Evaluation for Resident #1 was not filled out in its entirety. The cause of the violation was that the physician did not complete the form completely at the time of visit. To fix the violation right away a letter with a list of instructions for completing the Medical Evaluation was sent to the physician asking him to complete the standing Medical Evaluation in its entirety based on that visit or to schedule an appointment in order to complete a new Medical Evaluation in its entirety. Attached is a copy of the letter sent to the physician. To prevent future violations:

- Medical Evaluations will be gone over immediately to ensure that the physician did not miss anything
- Should anything have been missed on the form the physicin will be notified and asked to complete the form
- The Administrative Assistant will then make sure that the form has been returned by the physician and review it for completion.

These steps will be repeated until the form is filled out in its entirety. The administrator will be responsible for reviewing the Medical Evaluations as they are done before filing them as well as the administrative assistant to act as a system of checks and balances to ensure completion of all medical forms.

Signed Adam Helman

M
11/7/12

Date 11/6/12

Violation Report: 22394 - 11/05/2012 - Patton, Leslie
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600
2600.183(d) - Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home

2a. DESCRIPTION OF VIOLATION
"Dr. Sheffield's" brand triple antibiotic .33oz cream was stored in the storage closet located in the home's medication room. . The manufacturer expiration date was 6/2012.

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.

See attached

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Adam Herman*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) Adam Herman Administrator Date 11/6/12

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The above plan of correction is approved as of 11/7/12
(Date)

Plan of correction implementation status as of 11/7/12
(Date)

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

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

Riverstone Manor
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Walnutport, Pennsylvania 18088

Plan of Correction for Regulation 2600.183 (d)

This regulation is important because it ensures the home does not keep medications that are for residents no longer living in the home or that have been discontinued. The regulation was violated in that an expired tube of "Dr. Sheffield's" brand triple antibiotic .33 oz cream was stored in the storage closet in the homes medication room. The cause of the violation was the expired tube of triple antibiotic ointment being present in the closet of the medication room. This violation was **corrected at the time of inspection** by the immediate disposal of the tube of antibiotic cream. To prevent future violations all extra supplies for first aid kits will be inspected for date of expiration. This duty will be performed monthly by medication clerk on duty. This will ensure no future violations of this kind.

Signed Adam Heiman

[Handwritten signature]
11/7/12

Date 11/6/12

Violation Report: 22394 - 11/05/2012 - Patton, Leslie
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600
2600.187(d) - The home shall follow the directions of the prescriber.

2a. DESCRIPTION OF VIOLATION
Gavlyte N 400 ml solution belonging to resident #1 was located in the home's medication cart. There was no evidence of a current order nor was there any information to indicate the medication had been discontinued.

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.

See Attached

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Adam Herman*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) Adam Herman Administrator Date 11/6/12

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The above plan of correction was approved by *[Signature]* (Initials)
Plan of correction implementation status as of 11/7/12 (Date)
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 Partially Implemented - Adequate Progress
 Partially Implemented - Inadequate Progress
 Not Implemented

Riverstone Manor
One Main Street
Walnutport, Pennsylvania 18088

Plan of Correction for Regulation 2600.187(d)

The regulation is important because it ensure that residents receive medications and treatments as ordered by a physician. The regulation was violated in that a 400 ml solution of Gavilyte belonging to resident #1 was located in the medication cart, without a current order or a DC order. The cause of this violation was the presence of the unopened Gavilyte in the medication cart without a current order. The prescription on the bottle was dated February of 2012, before the current administration was in place. To fix the violation right away the Gavilyte solution was returned to Newhard's Pharmacy for disposal on the evening of November 5th 2012. A message was also left with the physician's office asking for either a scheduled appointment for the colonoscopy in which the prep solution would be required or a faxed DC order. Attached is a copy of the return form from Newhard's Pharmacy to verify receipt of unopened solution. There was no order in resident records for colonoscopy prep thus no order to discontinue the prep solution. To prevent future violations:

- Discontinued medications will be immediately returned to the pharmacy for disposal.
- A medication cart check will be done every med cycle by the med clerk on duty to assure no excess medications or DC'd medications are left in the cart.

Signed Adam Turner

[Handwritten signature]
11/7/12

Date 11/6/12

Violation Report: 22394 - 11/05/2012 - Patton, Leslie
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600
2600.252 - Each resident's record must include the following information: (1) through (25)

2a. DESCRIPTION OF VIOLATION

The record of residents' #1- #3 did not indicate the resident's identifying marks, if any.

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.

See Attached

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Adam Herman*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Adam Herman Administrator* Date *11/6/12*

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

The above plan of correction is approved as of *11/7/12*
(Date)

Plan of correction implementation status as of *11/7/12*
(Date)

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

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

Riverstone Manor
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Walnutport, Pennsylvania 18088

Plan of Correction for Regulation 2600.252

The regulation is important because having a complete record for each resident gives the home the best possible picture of who the resident is, what the residents history is and what services or needs the residents may have. The regulation was violated by the lack of indentifying marks being addressed in each residents file. The violation was corrected immediately by adding any indentifying marks of all residents to their face sheets located inside their files. To prevent future violations, a space on the face sheet form was created in the tabula program requiring indentifying marks. This duty will be performed by the Administrative Assistant and reviewed by the Administrator at the time of admission and at resident file updates.

Signed Aden Steiner

Date 11/6/12


11/7/12