



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

OCT 30 2013

Mr. Adam Herman, Owner  
Riverstone Manor, LLC  
P.O. Box 333  
Walnutport, Pennsylvania 18088

RE: Riverstone Manor  
One Main Street  
Walnutport, Pennsylvania 18088

Dear Mr. Herman:

As a result of the Department of Public Welfare's licensing inspection on September 4, 2013, 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 (relating to Personal Care Homes) must be maintained.

Your regular license for the period November 9, 2013 to November 9, 2014 was issued on July 30, 2013. Your regular license remains in good standing.

Sincerely,

Matthew Jones  
Acting Director /JH

Enclosure  
License Inspection Summary

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

Page 1 of 6

PCH Name: RIVERSTONE MANOR		License Number: 223940
Address: ONE MAIN STREET, WALNUTPORT, PA 18088		County: Northampton
Administrator: Adam Herman		Region: NORTHEAST
Legal Entity Name: RIVERSTONE MANOR LLC		
Legal Entity Address: PO BOX 333, WALNUTPORT, PA 18088		
Certificate(s) of Occupancy		
I-1	C-2 LP	
03/16/2012	11/01/1996	
Walnutport Borough	L&I	
Staffing Hours		
Resident Support: 0	Total Daily Staff: 66	Waking Staff: 60
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Renewal		
On-Site Inspections Dates and Department Representatives On-Site		
09/04/2013: Novak, Ryan; OHaire, Anne		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 72	Number of Residents who:	
Number of Residents Served: 64	Receive Supplemental Security Income: 50	
Secured Dementia Care Unit In Home: No	Are 80 Years of Age or Older: 19	
Area:	Have Mental Illness: 50	
Secured Dementia Unit Capacity, if Applicable:	Have an Intellectual Disability: 4	
Number of Residents Served in Secured Dementia Care Unit, if applicable:	Have a Mobility Need: 2	
Number of Current Hospice Residents: 2	Have a Physical Disability: 0	
Number of Hospice Residents In past year: 4		

*Adam Herman*

Violation Report: 22394 - 09/04/2013 - Novak, Ryan  
 PCH Name: RIVERSTONE MANOR

**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**  
 Resident #1 utilizes a bedside commode in Resident #1's bedroom. The bedside commode does not have a screen or covering around it to ensure privacy. The bedroom is a double occupancy 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.

*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>9-25-13</i>
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of <u>10/18/13</u> (Date)	Plan of correction implementation status as of <u>10/18/13</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 LLC  
1 Main Street  
PO Box 333  
Walnutport Pa 18088  
Telephone (610) 844-6693

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cont.

Plan of Correction

September 24, 2013

**Regulation 55 Pa.Code 2600.42(s)**

This regulation is important because it ensures the residents privacy. The regulation was violated in that the commode was in the residents room at the time of inspection. The commode was brought into the home when the resident was on hospice services. Although the commode was only used when the nurse was present and never in front of the roommate; the commode was never taken out after the hospice service expired. Direct care staff informed me that this commode is used as more of a dressing seat for the resident. I then showed them how to assist this resident with getting dressed in the chair that was already provided. What was done right away to fix the violation is we bought a privacy screen for the resident. Attached is a receipt to show proof of purchase. The privacy screen measures 6 feet high with three 3 foot panels. To prevent future violations Riverstone Manor will now only accept a commode when it is medically necessary to meet resident's needs and not just part of a nursing service package. To prevent future violations, the PCP will evaluate the residents need for a commode as part of direct care. This resident was reassessed and the PCP wrote an order to discontinue use of the commode. This will be responsibility of one of the 2 licensed administrators (who write the support plans whenever significant changes occur such as hospice services).

*Adam Herman*  
Administrator

*20/18/13*

Violation Report: 22394 - 09/04/2013 - Novak, Ryan PCH Name: RIVERSTONE MANOR	
<b>1. REGULATION 55 Pa.Code §2600</b> 2600.54(a) - Direct care staff persons shall have the following qualifications: (1) Be 18 years of age or older, except as permitted in § 2600.54(b). (2) Have a high school diploma, GED diploma, or active registry status on the Pennsylvania nurse aide registry. (3) Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary personal care services with reasonable skill and safety.	
<b>2a. DESCRIPTION OF VIOLATION</b> Direct care staff member A hired 11/15/12 did not have a high school diploma, GED diploma or active registration status on the Pennsylvania nurse aide registry.	
<b>3. PLAN OF CORRECTION (POC)</b> (Attach pages as necessary. Remember that you must sign and date any attached pages.) Includes 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.	
<p style="font-size: 2em; font-family: cursive;">See Attached</p> <ul style="list-style-type: none"> <li>The administrator shall assure that Direct care staff persons have a high school diploma, GED diploma or active registration status on the PA nurse aide registry.</li> <li>The administrator shall monitor for ongoing compliance.</li> </ul> <p style="font-size: 1.5em; font-family: cursive;">M 10/18/13</p>	
Repeat Violation: No	Date(s) of Previous Violation(s):
Signature of Legal Entity Representative (Required on EVERY Page) <span style="font-family: cursive; font-size: 1.2em;">Adam Herman</span>	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <span style="font-family: cursive; font-size: 1.2em;">Adam Herman Administrator</span>	Date <span style="font-family: cursive; font-size: 1.2em;">9-25-13</span>
<b>DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!</b>	
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The above plan of correction was approved by <span style="font-family: cursive; font-size: 1.2em;">[Signature]</span> (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

Violation Report: 22394 - 09/04/2013 - Novak, Ryan  
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2606  
2606.66(a) - A staff training plan shall be developed annually.

2a. DESCRIPTION OF VIOLATION  
The home does not have a staff training plan for training year 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

FYI

\* Riverstone Manor was licensed in November of 2012. All trainings were done in the home with the exception of "Occupational Safety" which was done in Northampton Community College in Bethlehem Campus. All trainings are scheduled by the Administrator  
\* The Administrator shall monitor for ONGOING compliance.

Repeat Violation: No Date(s) of Previous Violation(s): 10/21/13

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 9-25-13

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The above plan of correction is approved as of 10/21/13 (Date)

Plan of correction implementation status as of 10/21/13 (Date)

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

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

Violation Report: 22394 - 09/04/2013 - Novak, Ryan  
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 homes notice to the Fire Department does not reflect Resident #1 & #2 as having mobility needs in the event of an emergency.

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

The administrator shall monitor for ongoing compliance.

M 10/18/13

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 *9-25-13*

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(Date)

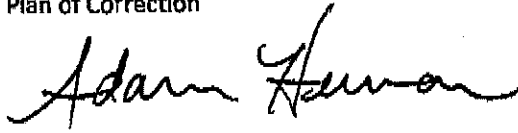
Plan of correction Implementation status as of 10/18/13  
(Date)

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(Initials)

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- Partially Implemented - Inadequate Progress
- Not Implemented

Riverstone Manor PCH

Plan of Correction



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cont.


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Adam Herman, Administrator

Septmeber 25, 2013

Regulation 55 Pa. Code 2600.124

This regulation is important because the fire department does need to know who has mobility needs as they may need help finding them in the event of a fire. Although residents #1 & #2 are not medically classified as having mobility needs by their doctor, I the administrator of Riverstone Manor do classify them as having a mobility need. So I staff and prepare accordingly to ere on the side of caution. The previous letter did list the residents as using wheelchairs but not having mobility needs. Because I staff and prepare documents as them having mobility needs, this letter to the fire department should have reflected my convictions. To fix this violation immediately, the letter to the fire department was changed to read that there are mobility needs for 2 people. Their room number is also given as they share the same first floor room that is closest to an exit . To assure this regulation is not violated again, we will discuss mobility needs and changes at our weekly quality assurance meetings. Attached is the new letter that was sent to the Fire Chief

  
10/8/13

Violation Report: 22394 - 09/04/2013 - Novak, Ryan  
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600  
2600.130(e) - If one or more residents or staff persons are not able to hear the smoke detector or fire alarm system, a signaling device approved by a fire safety expert shall be used and tested so that each resident and staff person with a hearing impairment will be alerted in the event of a fire.

2a. DESCRIPTION OF VIOLATION  
Resident #3 is unable to hear the fire alarm system. The home does not have a signaling device, approved by a fire safety expert and tested to ensure that Resident #3 is alerted in the event of a fire.

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*

*The administrator shall be responsible for ongoing compliance.  
m 10/18/13*

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 *9-25-13*

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(Date)

Plan of correction implementation status as of 10/18/13  
(Date)

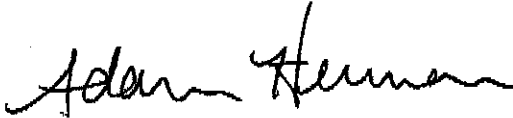
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(Initials)

- Fully Implemented
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- Partially Implemented - Inadequate Progress
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Riverstone Manor PCH

Plan of Correction



Adam Herman, Administrator

Septmeber 25, 2013

Regulation 55 Pa. Code 2600.130(e)

This regulation is important because it ensures the safety of a resident in the event of a fire. The regulation was violated in that our HOH (hard of hearing) resident stated that she cannot feel her vibrating signaling device when our fire alarms go off during fire drills. We tested the device's mechanical ability to work while our fire/smoke alarms were sounding. The device does indeed work. To prevent future violations, the procedure of function of the device was gone over with the resident and our Fire chief. There is an extra vibrating watch that goes with this device that the resident is now urged to wear at all times. In addition to this fire safety device an extra bed shaking device and strobe light alarm clock that reads fire when our fire alarms are sounding are now in the residents room and are activated by our T3 hard wired alarm monitoring system. Attached are pictures of the watch and specs of the new hard of hearing fire safety devices. All staff are responsible for fire drills and the administration staff hosting the fire drill will check and document that these devices worked at the time of the fire drill.

*M  
10/18/13*