



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

Sent via email to: [REDACTED]

MAILING DATE: June 26, 2014

Ms. Jacqueline Dancho, CFO
Albright Care Services
90 Maplewood Drive
Lewisburg, Pennsylvania 17837

RE: Riverview Manor
3201 River Road
Lewisburg, Pennsylvania 17837
License #202980

Dear Ms. Dancho:

As a result of the Department of Public Welfare's licensing inspection on May 2, 2014 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.

Sincerely,

Anne Graziano
Anne Graziano
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

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

| | | |
|--|--|------------------------------|
| PCH Name: RIVERVIEW MANOR | | License Number: 20288 |
| Address: 2304 RIVER ROAD, LEWISBURG, PA 17837 3201 | | County: Union |
| Administrator: MELISSA BOWERSOX | | Region: NORTHEAST |
| Legal Entity Name: ALBRIGHT CARE SERVICES | | |
| Legal Entity Address: 90 MAPLEWOOD DRIVE, LEWISBURG, PA 17837 | | |
| Certificate(s) of Occupancy C-2 LP 07/10/1991 LABOR AND INDUSTRY | | |
| Staffing Hours | | |
| Resident Support: 0 | Total Daily Staff: 63 | Waking Staff: 47 |
| Type of Inspection: Partial | BHA Docket Number: | Notice: Unannounced |
| Reason(s) for Inspection(s) Incident | | |
| On-Site Inspections Dates and Department Representatives On-Site 05/02/2014: Dumas, Gerald | | |
| Off-Site Inspection Dates and Inspectors, if Applicable 05/05/2014: Dumas, Gerald | | |
| Other Details | | |
| Partial or Full Triggers: | | Random Indicators: |
| Resident Demographic Data as of Inspection Dates | | |
| Licensed Capacity: 100 Number of Residents Served: 82 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: 1 | Number of Residents who: Receive Supplemental Security Income: 2 Are 60 Years of Age or Older: 51 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 10 <i>CG. 6-25-14</i> Have a Physical Disability: 0 | |

Violation Report: 20298 - 05/02/2014 - Dumas, Gerald
PCH Name: RIVERVIEW MANOR

1. REGULATION 55 Pa.Code §2600

2600.132(h) - Residents shall evacuate to a designated meeting place away from the building or within the fire-safe area during each fire drill.

2a. DESCRIPTION OF VIOLATION

The home's fire drill log indicated that on 10/23/2013 at 11:35 p.m. resident # 1 was not evacuated to the home's designated meeting location. The home's Administrator # 1 stated that a decision was made not to evacuate resident # 1 due to a Urinary Tract Infection. The resident was ill at the time of the home's fire drill.

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.

- During Fire Drill on 10/23/13 at 11:35pm staff reported to Administrator that resident # 1 was ill and couldn't participate in the drill. Administrator went to resident's Room and found her in her bathroom vomiting. Administrator informed staff not to evacuate the resident in order to preserve her dignity. Had this been an actual emergency and not a Drill the resident would have been evacuated to a designated meeting place. Resident # 1 was not immobile as indicated on page 1 of this Violation Report.

- We are requesting that you reconsider this violation due to the circumstances involved

It is essential for all residents and staff to respond to a life safety warning such as a fire alarm.

The Administrator/designee has the discretion each month regarding when to run a drill. Based on these elements, the violation stands. *CP. 6-25-14*

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Melissa Bowersox

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

Melissa Bowersox

Date 5-19-14

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

The above plan of correction is approved as of 6-25-14
mobility status acknowledged. (Date)
In the future home will evacuate all residents when the alarm rings

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

Plan of correction implementation status as of 6-25-14
(Date)

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