



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

NOV 24 2014

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

RE: Riverstone Manor
One Main Street
Walnutport, Pennsylvania 18088
License #: 223940

Dear Mr. Herman:

As a result of the Department of Public Welfare's licensing inspection on August 28, 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.

Your regular license for the period November 9, 2014 to November 9, 2015 was issued on July 19, 2014. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink that reads "Matthew Jones".

Matthew J. Jones
Director *SH*

Enclosure
License Inspection Summary

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

PCH Name: RIVERSTONE MANOR		License Number: 22394						
Address: ONE MAIN STREET, WALNUTPORT, PA		County: Northampton						
Administrator: ADAM HERMAN		Region: NORTHEAST						
Legal Entity Name: RIVERSTONE MANOR								
Legal Entity Address: P.O. BOX 333, WALNUTPORT, PA								
Certificate(s) of Occupancy <table border="0"> <tr> <td>I-1</td> <td>C-2 LP</td> </tr> <tr> <td>03/15/2012</td> <td>11/01/1996</td> </tr> <tr> <td>BOROUGH OF WALNUTPORT</td> <td>LABOR AND INDUSTRY</td> </tr> </table>			I-1	C-2 LP	03/15/2012	11/01/1996	BOROUGH OF WALNUTPORT	LABOR AND INDUSTRY
I-1	C-2 LP							
03/15/2012	11/01/1996							
BOROUGH OF WALNUTPORT	LABOR AND INDUSTRY							
Staffing Hours <table border="0"> <tr> <td>Resident Support: 0</td> <td>Total Daily Staff: 69</td> <td>Waking Staff: 52</td> </tr> </table>			Resident Support: 0	Total Daily Staff: 69	Waking Staff: 52			
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<table border="0"> <tr> <td>Type of Inspection: Full</td> <td>BHA Docket Number:</td> <td>Notice: Unannounced</td> </tr> </table>			Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced			
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced						
Reason(s) for Inspection(s) Renewal								
On-Site Inspections Dates and Department Representatives On-Site 08/28/2014: Dumas, Gerald; Rushin, Julienne								
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 Served: 69 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: 2	Number of Residents who: Receive Supplemental Security Income: 58 Are 60 Years of Age or Older: 68 Have Mental Illness: 15 Have an Intellectual Disability: 3 Have a Mobility Need: 0 Have a Physical Disability: 1							

Violation Report: 22394 - 08/28/2014 - Dumas, Gerald
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600

2600.26(b) - The quality management plan shall address the periodic review and evaluation of the following:

- (1) The reportable incident and condition reporting procedures.
- (2) Complaint procedures.
- (3) Staff person training.
- (4) Licensing violations and plans of correction, if applicable.
- (5) Resident or family councils, or both, if applicable.

2a. DESCRIPTION OF VIOLATION

The home's quality management review dated 8/9/2014 did not address the following items:

- (1) Reportable incidents
- (2) Complaint procedures
- (3) Staff person training

3. PLAN OF CORRECTION (POC) (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.

Please 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)	Date
Adam Herman Administrator	10/30/14

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

The above plan of correction is approved as of 11-17-14
(Date)

Plan of correction implementation status as of 11-17-14
(Date)

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

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

P2A 89

Plan of Correction

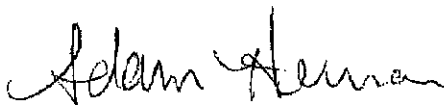
Inspection Date 8/28/2014

Riverstone Manor LLC

PO Box 333 1 Main Street

Walnutport, PA 18088

10/30/2014



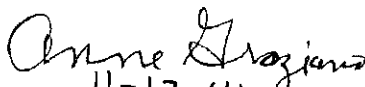
Adam Herman,

Administrator/ Owner

Regulation 2600.26(b) states that the quality management review must contain:

1. The reportable incident and condition reporting procedures.
2. Complaint procedures.
3. Staff person training.
4. Licensing violations and plans of correction, if applicable.
5. Resident or family councils, or both, if applicable.

This regulation is important in that personal care homes as well as any business will assure that the needs of their clients as well as their concerns are addressed and remedied in a timely fashion. The regulation was violated in that the annual quality management report did not state about reportable incidents, complaint procedures and staff person training. Although all of these items are documented and kept in separate files they also need to be in the Quality Management Reports as well. What was done right away to fix this violation at the time of inspection was to make a copy of the annual staff training record, reportable incidents and complaint procedures policies and place it into the Quality Management Report at the time of inspection. What was done to prevent future violations was to add the written dialogue with the mention of all 5 parts of the Quality Management requirements as per the DPW. The administrator will be responsible for preventing future violations. Please see the new attached model report Riverstone Manor will use to encompass all aspects of the regulation.


11-17-14

Violation Report: 22394 - 08/28/2014 - Dumas, Gerald
PCH Name: RIVERSTONE MANOR

1. REGULATION 65 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
A criminal background was not completed for direct care staff person A (date of hire 4/8/14).

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.

Please 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 *10/30/14*

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

The above plan of correction is approved as of 11-17-14
(Date)

The above plan of correction was approved by *OO*
(Initials)

Plan of correction implementation status as of 11-17-14
(Date)

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

P3A-29

Plan of Correction

Inspection Date 8/28/2014

Riverstone Manor LLC

PO Box 333 1 Main Street

Walnutport, PA 18088

10/30/2014




Adam Herman,

Administrator/ Owner

Regulation 2600.51 states that Criminal History checks and hiring policies shall be in accordance with OAPSA. This regulation is important because it ensures the safety of the residents within the home from being exposed to a criminal element and possible danger. The cause of this violation was the absence of the report in the employee file. What was done right away to fix the violation was to run another report **at the time of inspection** to show that this employee in fact did and does not have a criminal background. To prevent future violations the administrator will be the only person to obtain and file all employee documents. See attached current criminal background check. The administrator will monitor for ongoing compliance.

Oliver Brazian
11-17-14

Violation Report: 22394 - 08/28/2014 - Dumas, Gerald	
PCH Name: RIVERSTONE MANOR	
1. REGULATION 55 Pa.Code §2600 2600.103(e) - Food served and returned from an individual's plate may not be served again or used in the preparation of other dishes. Leftover food shall be labeled and dated.	
2a. DESCRIPTION OF VIOLATION Three rewrapped chicken patties, stored in the kitchen's upright refrigerator, were not labeled or dated.	
3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.) <i>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.</i>	
<i>Please See Attached</i>	
Repeat Violation: No	Date(s) of Previous Violation(s):
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) <i>Adam Herman Administrator</i>	Date <i>10/31/14</i>
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!	
The above plan of correction is approved as of <u>11-12-14</u> (Date)	Plan of correction Implementation status as of <u>11-17-14</u> (Date)
The above plan of correction was approved by  (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

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Plan of Correction

Inspection Date 8/28/2014

Riverstone Manor LLC

PO Box 333 1 Main Street

Walnutport, PA 18088

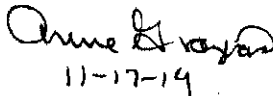
10/30/2014



Adam Herman,

Administrator/ Owner

Regulation 2600.103(e) states that left over shall be named and dated. This regulation is important because it helps control the bacteria growth that causes foodborne illnesses. This regulation was violated in that there were three unused chicken patties still in the original wrapper in the upright freezer in our kitchen with no name/dated label. What was done right away to fix the violation was to throw away the chicken patties at the time of inspection. To prevent future violations the staff reviewed the policy of labeling and dating all foods placed in refrigerator, shelves and freezers. Foodborne illnesses and bacteria were reviewed with the cooks by our own serve safe certified trainer. This will be reviewed monthly in Quality Management meetings and spot checks performed by administration. The administrator shall monitor for ongoing compliance.



Plan of Correction

Violation Report: 22394 - 08/28/2014 - Dumas, Gerald
 PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa. Code §2600

2600.132(d) - Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.

2a. DESCRIPTION OF VIOLATION

On 7/20/14 the local fire chief determined that the maximum amount of time for the residents and staff to safely evacuate the building is 2 minutes and 55 seconds.

On 8/22/14 at 11:45 a.m. the home conducted a fire drill. The evacuation time of 2 minutes and 58 seconds exceeded the amount of time determined by the local fire chief of 2 minutes and 55 seconds.

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.

Please See Attached

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

Signature of Legal Entity Representative
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Adam Herman Date 10/30/14
 Adam Herman Administrator

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The above plan of correction is approved as of 11-17-14
 (Date)

Plan of correction implementation status as of 11-17-14
 (Date)

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

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

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89

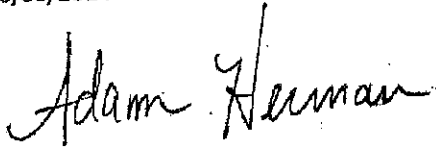
Inspection Date 8/28/2014

Riverstone Manor LLC

PO Box 333 1 Main Street

Walnutport, PA 18088

10/30/2014



Adam Herman,

Administrator/ Owner

Regulation 2600.132(d) states that Residents shall be able to evacuate the entire building in a time appointed by the fire chief. Our evacuation time this year is 2 minutes and 55 seconds which happens to be 2 seconds slower than last year. The regulation was violated in that a fire drill time was 2 minutes and 58 seconds. We were 3 seconds over our recommended fire evacuation time. This time is determined by how fast the fire drill is completed during a fire department assist drill. What was done at the time of that drill (to fix a potential violation) was to hold a second drill in which the residents were evacuated in 2 minutes and 48 seconds later that month.

Riverstone Manor's administration takes great pride with the amount of effort and continued fire safety training given to staff and residents within the home. We complete double the fire drills than that is required of the DPW monthly. We host silent alarm fire drills, where the host of the drill is wearing a t-shirt that has the word fire on it to prepare in case our equipment ever malfunctions. Riverstone Manor also has multiple "middle of the night" fire drills to keep all staff on all shifts knowledgeable of fire safety and protocol as witnessed by the inspector during our review. The administrator has taken the train the trainer course in fire safety. Administration records true fire drill times as is apparent on our fire drill log and will always hold a high standard in regards to fire safety and honesty. We openly admitted that we had gone over our time and documented it. The only preparation for prevention of future violations I've been told by the fire chief is to continue to do what we are doing as it is more than most facilities. The administrator shall always be responsible for ongoing compliance.

Anne Grayson
11-17-14

Adm or designee will review monthly fire drill for ongoing compliance

Plan of Correction

Violation Report: 22394 - 08/28/2014 - Dumas, Gerald PCH Name: RIVERSTONE MANOR	
1. REGULATION 55 Pa.Code §2800 2800.133(a)(2) - If the home serves nine or more residents, if the exit or way to reach the exit is not immediately visible, access to exits shall be marked with readily visible signs indicating the direction to travel.	
2a. DESCRIPTION OF VIOLATION The exit door, down the hallway from E 13, was not identified as the second egress from the second floor.	
3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.) <i>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.</i>	
Please See Attached	
Repeat Violation: No	Date(s) of Previous Violation(s):
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) <i>Adam Herman Administrator</i>	Date <i>10/30/14</i>
DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!	
The above plan of correction is approved as of <u>11-17-14</u> (Date)	Plan of correction implementation status as of <u>11-17-14</u> (Date)
The above plan of correction was approved by <i>[Signature]</i> (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

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Inspection Date 8/28/2014

Riverstone Manor LLC

PO Box 333 1 Main Street

Walnutport, PA 18088

10/30/2014

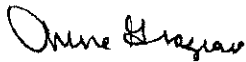


Adam Herman,

Administrator/ Owner

Regulation 2600.133(a)(2) states that home serving more than 9 residents, if the exit way to reach the exit is not immediately visible, access to exits shall be marked with readily visible signs indicating the direction to travel. This regulation is important because it helps ensure a speedy evacuation of the residents in the building in the event of a catastrophe. This regulation was violated in that "The exit door, down the hallway from E 13, was not identified as the second egress from the second floor." The cause of the violation was that no person or authority noted the need for an additional exit sign to be hung at that particular sight. What was done to fix the violation right away was place another exit sign above the hallway door to show the second route of egress at the time of inspection. The extra exit sign was also marked on the evacuation map that hangs adjacent to E 13's room next to the exit door to the stairway to outside. By doing this, we will permanently prevent future violations as the maintenance manager and the administrator check the amount of exit signs and extinguishers as per our fire safety protocol checklist given to us by the fire chief on a monthly basis. Compliance in this matter will be an ongoing responsibility of the administrator. Please see attached picture of the exit sign that is hung exactly where the inspector informed us that it had to be.

Adm or designee will be responsible for insuring ensuring ongoing compliance. Q. 11-17-14



Violation Report: 22384 - 08/28/2014 - Dumas, Gerald
PCH Name: RIVERSTONE MANOR

1. REGULATION 65 Pa.Code §2600
2800.141(a)(2) - The medical evaluation must include the following: (1) through (10)

2a: DESCRIPTION OF VIOLATION
The DME dated 6/13/14 for resident # 1 does not indicate the resident's special health or dietary needs or allergies if any.
The DME dated 5/2/14 for resident # 2 does not indicate if the resident has allergies.

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.

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 *10/30/14*

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The above plan of correction is approved as of 11-17-14
(Date)

Plan of correction implementation status as of 11-17-14
(Date)

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

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

P7A 8 9

Plan of Correction

Inspection Date 8/28/2014

Riverstone Manor LLC

PO Box 333 1 Main Street

Walnutport, PA 18088

10/30/2014



Adam Herman,

Administrator/ Owner

Regulation 2600.141(a)(2) states The medical evaluation must include a list of allergies, special health needs or dietary needs as well as other criteria. The regulation is important because it allows the facility to properly care for their resident. The regulation was violated in that the DME did not indicate the resident #1's dietary need of which there is none (regular diet), or resident #2's allergies. Fortunately they are listed on MARS and RASP. The cause of the violation was a clerical error not caught by the administrator when medical personnel completed these forms. What was done right away to fix the violation was to call the medical group CRNP to get clarification on the medical evaluations and requested new forms to be completed. To prevent future violation the action was to allow 2 medical professionals from CRNP access to our tabulapro electronic medical records program which allows the doctors access to their patients only. By doing this the clinician cannot finish completing the form to print until all fields are indicated. An inservice was held with CRNP by the administration team of Riverstone Manor to educate the medical group how to navigate through the program. The administrator will be responsible for ongoing compliance. Please see attached the copies of the new DME's with the field clearly indicating no allergies or dietary needs for resident #1 and #3. There is also a letter from Exigo/Arcadia, thanking us for the inservice and apologizing for the incomplete paperwork.

Anne Grayson 11-17-14

Violation Report: 22394 - 08/28/2014 - Dumas, Gerald
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600
2600.224(a) - A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

2a. DESCRIPTION OF VIOLATION
The Pre-admission screenings for resident # 1 (dated 6/6/14) and [redacted] do not indicate whether their needs can be met in that personal care 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.

Release 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* Date *10/20/14*

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The above plan of correction is approved as of 11-17-14
(Date)

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

Plan of correction implementation status as of 11-17-14
(Date)

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

PSA99

Plan of Correction
Inspection Date 8/28/2014

Riverstone Manor LLC
PO Box 333 1 Main Street
Walnutport, PA 18088
10/30/2014



Adam Herman,
Administrator/ Owner

Regulation 2600.224(a) states that A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home. This regulation is important because it ensures that residents' needs can be met within the home accepting them. The Pre-admission screening for resident #1 [redacted] did not indicate whether their needs can be met in the personal care home by checking the yes box. The cause of the violation was the lack of the check mark on the form by the person who completed them. What was done right away to fix the violation was to put a check in the box stating that yes these residents' needs can be met at Riverstone Manor. This was done at the time of inspection. To prevent future violations the appointed person to fill out the pre-screening assessments was given further instruction on review of these forms as well giving all future forms for prescreening assessments to the administrator for approval before filing. This will be a particular point of interest while doing our monthly chart audits. The administrator will be responsible for ongoing compliance.

Please ensure that the date this correction was made is noted next to signature or initials. *ep.*
Ann Grayson 11-17-14

Violation Report: 22394 - 08/28/2014 - Dumas, Gerald
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600

2600.251(b) - The entries in a resident's record shall be permanent, legible, dated and signed by the staff person making the entry.

2a. DESCRIPTION OF VIOLATION

The evaluation date and completion on resident # 3's DME (dated 6/12/14) are written over White- Out.

The dates for the last assessment and support plan on the current RASP (dated 6/4/14) for resident # 3 are written over White-Out.

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.

Please 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

Date 10/30/14

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(Date)

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(Date)

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(Initials)

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P9A89

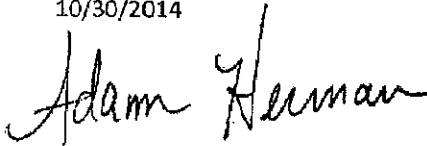
Plan of Correction**Inspection Date 8/28/2014**

Riverstone Manor LLC

PO Box 333 1 Main Street

Walnutport, PA 18088

10/30/2014



Adam Herman,

Administrator/ Owner

Regulation 2600.251(b) states the entries in a resident's record shall be permanent, legible, dated and signed by the staff person making the entry. This regulation is important because it ensures true and factual information in regards to care at the personal care home. The regulation was violated in that the evaluation date of completion on resident #3's DME are what appeared to have been written over whiteout and copied. The last assessment date on the current RASP for resident #3 were written over white-out. The cause of this violation was the staff member completing the rasp was unaware of the no white-out regulation on the RASP. The whiteout on the DME was investigated and determined to be the result of the Doctors' assistant who was also unaware of the regulation. To prevent future violations the action was to allow 2 medical professionals from CRNP access to our tabulapro electronic medical records program which allows the doctors access to their patients only. By doing this the clinician does not have to hand write the required forms and cannot finish completing the form to print until all fields are indicated. An inservice was held with CRNP by the administration team of Riverstone Manor to educate the medical group how to navigate through the program. The administrator will be responsible for ongoing compliance. Please see attached the copies of the new DME's with the DME dates printed. There is also a letter from Exigo/Arcadia, thanking us for the inservice and apologizing for the whited out paperwork.

 11-17-14