



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

OCT 26 2016

Mr. Craig T. Luffey, Administrator  
Rivercliff Terrace, Inc.  
120 Allegheny Avenue  
Kittanning, Pennsylvania 16201


RE: Rivercliff Terrace Annex  
322 North McKean Street  
Kittanning, Pennsylvania 16201  
License #: 426930

Dear Mr. Luffey:

As a result of the Department of Human Services' annual licensing inspection on July 21, 2016 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,

  
Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary

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

PCH Name: RIVERCLIFF TERRACE ANNEX		License Number: 42693
Address: 322 NORTH MCKEAN STREET, KITTANNING, PA 16201		County: Armstrong
Administrator: Craig Luffey		Region: WEST
Legal Entity Name: RIVERCLIFF TERRACE INC		
Legal Entity Address: 120 ALLEGHENY AVENUE, KITTANNING, PA 16201		
Certificate(s) of Occupancy LPCH 07/11/1981 PA L&I		<b>RECEIVED</b>  SEP 21 2016 WEST REGION FIELD OFFICE Human Services Licensing
<b>Staffing Hours</b>		
Resident Support: 24	Total Daily Staff: 48	Working Staff: 36
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 07/21/2016: Georgoulis, Karen; Evegos, Joseph		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers: N/A		Random Indicators: N/A
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 28 Number of Residents Served: 24 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: 0 Number of Hospice Residents in past year: 0	<b>Number of Residents who:</b> Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 24 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 0 Have a Physical Disability: 0	

RECEIVED

SEP 21 2016

Page 2 of 7

Violation Report: 42693 - 07/21/2016 - Georgoulis, Karen  
PCH Name: RIVERCLIFF TERRACE ANNEX

WEST REGION FIELD OFFICE  
Human Services Licensing

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

The second floor common bathroom did not have a lock to ensure privacy.

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.

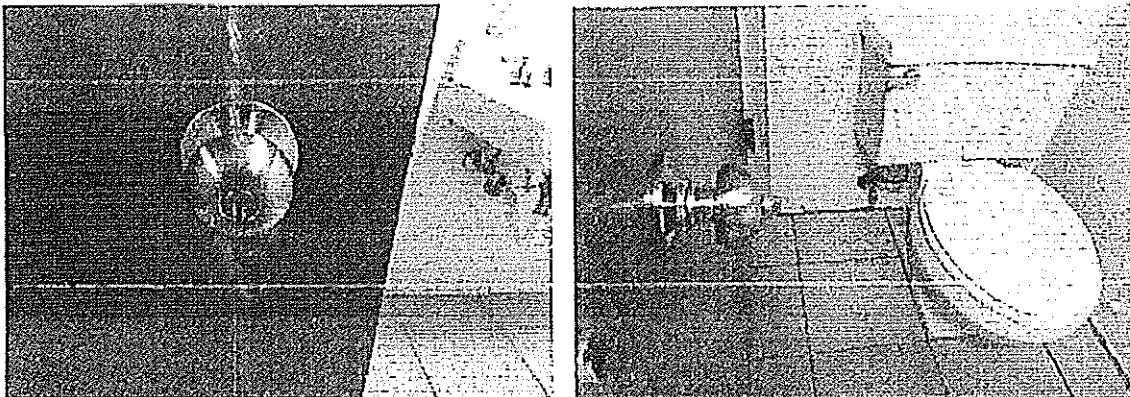
During Licensing Inspection and Exit Interview - Violation was discussed with Administrator.

A lock was Immediately installed on second floor bathroom to ensure privacy.

Administrator is aware that all Bathrooms are to have a lock or other such device to ensure privacy during bathing, dressing, changing and medical procedures.

Administrator conducted a training with all staff regarding regulation 2600.42(s).

Administrator and all Staff are aware and will Observe and Report any bathrooms without a lock upon them



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

Signature of Legal Entity Representative (Required on EVERY Page)	<i>C. T. Luffey</i>
--	---------------------

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)	Craig T. Luffey	Date 09-08-2016
---	-----------------	-----------------

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

The above plan of correction is approved as of <u>9-22-16</u> (Date)	Plan of correction implementation status as of <u>9-22-16</u> (Date)
The above plan of correction was approved by <u>[Signature]</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

RECEIVED

SEP 21 2016

Page 3 of 7

Violation Report: 42693 - 07/21/2016 - Georgoulis, Karen  
PCH Name: RIVERCLIFF TERRACE ANNEX

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.65(f) - Training topics for the annual training for direct care staff persons shall include the following:

- (1) Medication self-administration training.
- (2) Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
- (3) Care for residents with dementia and cognitive impairments.
- (4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
- (5) Personal care service needs of the resident.
- (6) Safe management techniques.
- (7) Care for residents with mental illness or mental retardation, or both, if the population is served in the home.

2a. DESCRIPTION OF VIOLATION

Direct care staff person A did not complete training in the following topics during the 2015 training year:

- \* Medication self-administration training.
- \* Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
- \* Care for residents with dementia and cognitive impairments.
- \* Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
- \* Personal care service needs of the resident.
- \* Safe management techniques.

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.

After Licensing Inspection and Exit Interview - Regulation 2600.65 (f) was explained in detail to Administrator.

Above topics listed in violation: Training will be conducted immediately, and upon yearly trainings. Staff person A, as well as all other Staff have been trained in all topics contained in Regulation 2600.65 (f)

Administrator has implemented Training for 2600.65 (f) into Yearly Training Plan.

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)

Craig T. Luffey

Date 09-08-2016

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

The above plan of correction is approved as of 9.22-16  
(Date)

Plan of correction implementation status as of 9.22-16  
(Date)

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

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

RECEIVED

SEP 21 2016

Page 4 of 7

Violation Report: 42693 - 07/21/2016 - Georgoulis, Karen  
PCH Name: RIVERCLIFF TERRACE ANNEX

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 65 Pa. Code §2600

2600.88(a) - Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

There was an approximately 16" by 30" section of wallpaper missing from the wall next to the bed in resident bedroom #210.

There was an area measuring approximately 30" long and 4" wide of water damage on the third floor rear stairwell ceiling.

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 Inspection and During Exit Interview, Regulation 2600.88 (a), was discussed and explained.

Room: 210 - Wallpaper was completely removed from aforementioned wall, and fresh primer and paint was applied to wall.

3rd Floor Water Damage: New roof was applied, and that 30" by 4" wide water damage was repaired and painted.

Regulation was discussed amongst Staff, during an after Licensing Inspection Training. Administrator and Staff, are aware of Regulation 2600.88 (a), and will report immediately to Administrator so it can be repaired immediately.

*Immediately: The Administrator or designee shall check the home at least weekly to ensure floors, walls, ceilings, windows, doors and other surfaces are clean, in good repair and free of hazards 9-22-16*

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)

Craig T. Luffey

Date 09-08-2016

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

The above plan of correction is approved as of 9-22-16  
(Date)

Plan of correction implementation status as of 9-22-16  
(Date)

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

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

RECEIVED

SEP 21 2016

Page 5 of 7

Violation Report: 42693 - 07/21/2016 - Georgoulis, Karen  
PCH Name: RIVERCLIFF TERRACE ANNEX

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.89(b) - Hot water temperature in areas accessible to the resident may not exceed 120°F.

2a. DESCRIPTION OF VIOLATION

The water temperature of the sink in resident bedroom #210 measured 123.6 degrees Fahrenheit.

The water temperature of the sink in the third floor common shower/bathroom measured 124.7 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.*

A inline Thermomator was installed coming off of the Hot Water Tank - Showing the Temperature of Water coming out of the tank. With this being on, Output temperature can be regulated and adjusted as necessary.

Administrator Will Check Tanks Monthly along with other monthly tasks, thus ensuring a regulated comfortable and safe temperature of below 120 degrees fahrenheit.

Administrator will also use hand held thermometers, to check various hot water temperatures throughout the facility.

*Immediately a designee shall check water temperatures at least weekly to ensure hot water temperatures in areas accessible to residents does not exceed 120°F. 9-22-16,*

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)

Craig T. Luffey

Date 09-08-2016

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

The above plan of correction is approved as of 9-22-16  
(Date)

Plan of correction implementation status as of 9-22-16  
(Date)

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

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

RECEIVED

SEP 21 2016

Page 6 of 7

Violation Report: 42693 - 07/21/2016 - Georgoulis, Karen  
PCH Name: RIVERCLIFF TERRACE ANNEX

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa. Code §2600  
2600.100(a) - The exterior of the building and the building grounds or yard must be in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

There was an area of concrete raised approximately 1/2" and approximately 17" long at the sidewalk at the bottom of the front porch steps.

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.

Upon Licensing Inspection and Exit Interview, Licensing Representatives, pointed out Regulation: 2600.100 (a) - Informed Administrator of situation.

Administrator Immediately had sidewalk repaired, and it aware of regulation. Staff, have also been informed to report any damage to grounds or yard to Administrator so it can be fixed immediately.

*Immediately: The Admin's tractor or designee check the exterior of the building and the building grounds or yard to ensure all items are in good repair and free of hazards. 9-22-16*

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

Signature of Legal Entity Representative  
(Required on EVERY Page) *C.T. Luffey*

Printed Name and Title of Legal Entity Representative      Date  
(Required on EVERY Page)      Craig T. Luffey      09-08-2016

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

The above plan of correction is approved as of 9-22-16  
(Date)

Plan of correction implementation status as of 9-22-16  
(Date)

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

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

RECEIVED

SEP 21 2016

Page 7 of 7

Violation Report: 42693 - 07/21/2016 - Georgoulis, Karen  
PCH Name: RIVERCLIFF TERRACE ANNEX

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Codo §2600

2600.103(f) - Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

2a. DESCRIPTION OF VIOLATION

There was no thermometer in the freezer section of the middle kitchen refrigerator/freezer.

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.

Thermometer was immediately placed in middle kitchen refrigerator/freezer.

Spare Thermometers were purchased to ensure this does not happen again. Staff was instructed on the importance of Thermometers in refrigerators and freezers to ensure food is preserved at the appropriate temperatures

Administrator will check all refrigerators/freezers on a regular basis, as well as other tasked checks, to ensure all equipment has the appropriate thermometers within and are at the required/acceptable temperatures.

*Immediately: checks will be completed at next weekly. 9-23-16*

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)

Craig T. Luffey

Date 09-08-2016

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

The above plan of correction is approved as of

9-22-16  
(Date)

Plan of correction implementation status as of

9-22-16  
(Date)

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

The above plan of correction was approved by

[Signature]  
(Initials)