



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JUN 01 2017

Mr. Doug Flasher,
Chief Operating Officer
Albright Care Services
90 Maplewood Drive
Lewisburg, Pennsylvania 17837

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

Dear Mr. Flasher:

As a result of the Department of Human Services' annual licensing inspection on March 23, 2017 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.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read "J. Rowe".

Jacqueline L. Rowe
Director

Enclosure
License Inspection Summary

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

PCH Name: RIVERVIEW MANOR		License Number: 20298
Address: 3201 RIVER ROAD, LEWISBURG, PA 17837		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 L & I		
Staffing Hours		
Resident Support:	Total Daily Staff: 32	Waking Staff: 24
Type of Inspection: Full	BHA Docket Number:	Notice:
Reason(s) for Inspection(s)		
Renewal		
On-Site Inspections Dates and Department Representatives On-Site		
03/23/2017: Moskalczyk, Michele; Deluca, Amy		
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: 100 Number of Residents Served: 32 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: 1	Number of Residents who: Receive Supplemental Security Income: 1 Are 60 Years of Age or Older: 32 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 0 Have a Physical Disability: 0	

Violation Report: 20298 - 03/23/2016 - Moskalczyk, Michele
 PCH Name: RIVERVIEW MANOR

1. REGULATION 55 Pa.Code §2600
 2600.17 - Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long-term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

2a. DESCRIPTION OF VIOLATION

The privacy code of Licensing Inspection Summary dated 3/1/2016 was attached and accessible to be viewed by unauthorized persons.

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.

- PCHA / Designee will not post privacy code page of Summary for All inspections.
- Privacy code page of summary dated 3/1/16 removed inspection day 3/23/17

The administrator shall monitor and assure ongoing compliance.

m
4/25/17

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Melissa Bowersox</i>	Date <i>4/6/17</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>4/25/17</u> (Date)	Plan of correction implementation status as of <u>4/25/17</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

Violation Report: 20298 - 03/23/2016 - Moskalczyk, Michele
 PCH Name: RIVERVIEW MANOR

1. REGULATION 55 Pa.Code §2600
 2600.64(c) - An administrator shall have at least 24 hours of annual training relating to the job duties.


2a. DESCRIPTION OF VIOLATION
 A review of Administrator A's training records indicates he/she completed only 21.5 of the required 24 hours of Department approved annual training for 2016.

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.

- PCHA completed 2.5 hours approved relias trainings on 4/3/17
 (See Attached)

- PCHA will complete 24 hours approved trainings annually.

The administrator shall monitor for ongoing compliance.

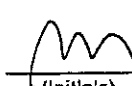
4/25/17


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 *4/4/17*

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Violation Report: 20298 - 03/23/2016 Moskalczyk, Michele
 PCH Name: RIVERVIEW MANOR

1. REGULATION 55 Pa.Code §2600

2600.84 - Heat sources, such as steam and hot heating pipes, water pipes, fixed space heaters, hot water heaters and radiators exceeding 120°F that are accessible to the resident must be equipped with protective guards or insulation to prevent the resident from coming in contact with the heat source.

2a. DESCRIPTION OF VIOLATION

During an inspection of the main dining area steam trays were observed containing hot water that had a thermometer reading of 149 degrees and were accessible to residents, posing a safety risk.

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.

- The steam trays in the PCH dining room will be drained, turned off after all meals and re-filled 15 minutes prior to meals.
- The steam trays, when filled, will not be left unattended.
- PCHA will monitor for ongoing compliance

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Violation Report: 20298 - 03/23/2016 - Moskalczyk, Michele
 PCH Name: RIVERVIEW MANOR

1. REGULATION 55 Pa.Code §2600
 2600.105(g)(2) - Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

2a. DESCRIPTION OF VIOLATION

A thick layer of lint was observed covering the ground on the exterior of the building outside of the laundry area.

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.

- The layer of lint was cleaned off the ground 3/23/16, Day of inspection.
- A piped ductwork with a lint collection location was added to route the exhaust away from the ground. (see attached)
- Environmental services Director will assure lint collection be inspected & cleaned weekly.
- PCHA will monitor for ongoing compliance.

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Violation Report: 20298 - 03/23/2016 - Moskalczyk, Michele
 PCH Name: RIVERVIEW MANOR

1. REGULATION 55 Pa.Code §2600
 2600.132(f) - Alternate exit routes shall be used during fire drills.

2a. DESCRIPTION OF VIOLATION
 According to fire drill logs reviewed during the inspection, zones 3 and 4 are consistently recorded as the only exit routes used for fire drills.

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.

- All exit doors within the PCH have been numbered.
- Fire Drill documentation will indicate ^{exit} door numbers that were used during each drill.
- PCHA will monitor for ongoing compliance

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Violation Report: 20298 - 03/23/2016 - Moskalczyk, Michele
 PCH Name: RIVERVIEW MANOR

1. REGULATION 55 Pa. Code §2600
 2600.132(g) - Fire drills shall be held on different days of the week, at different times of the day and night, not routinely held when additional staff persons are present and not routinely held at times when resident attendance is low.

2a. DESCRIPTION OF VIOLATION
 Fire drill logs indicate fire drills were held on the following dates:
 2/25/2016; 3/23/2016; 4/22/2016; 5/31/2016; 6/29/2016; 7/27/2016; 08/31/2016; 09/02/2016; 10/26/2016; 11/25/2016; 12/28/2016; 01/27/2017; 02/27/2017.
 At the time of the inspection a fire drill had not been conducted for March. Fire drills are consistently held the last week of the month

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.

- Environmental Services Director will conduct Fire Drills on different days of the week, at different times of day and night each month.
 - PCH will monitor for ongoing compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Printed Name and Title of Legal Entity Representative
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Violation Report: 2029B - 03/23/2016 - Moskaiczuk, Michele
 PCH Name: RIVERVIEW MANOR

1. REGULATION 55 Pa.Code §2600
 2600.187(a) - A medication record shall be kept to include the following for each resident for whom medications are administered:
- (1) Resident's name.
 - (2) Drug allergies.
 - (3) Name of medication.
 - (4) Strength.
 - (5) Dosage form.
 - (6) Dose.
 - (7) Route of administration.
 - (8) Frequency of administration.
 - (9) Administration times.
 - (10) Duration of therapy, if applicable.
 - (11) Special precautions, if applicable.
 - (12) Diagnosis or purpose for the medication, including pro re nata (PRN).
 - (13) Date and time of medication administration.
 - (14) Name and initials of the staff person administering the medication.

2a. DESCRIPTION OF VIOLATION
 On 3/22/2017 Resident #1's MAR indicates glucometer readings of 128 at dinner time and 272 at bedtime. No readings were found in the resident's glucometer for these two MAR documentations.
 On 02/28/2017 Resident #1's MAR indicates a glucometer reading of 122 at dinner time but no reading was found in the resident's glucometer for this MAR documentation. Resident #1's Physician's orders indicate he/she is to have blood sugar testing before meals and at bedtime.

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.

- Nurse Manager will conduct daily glucometer readings on all residents blood sugar readings to assure readings match MAR documentation and to also be sure all readings are being stored in glucometers. If after 3 mos documentation indicates 100% accuracy audits will be conducted weekly.
 - ACHA will monitor for ongoing compliance.

Repeat Violation: Yes	Date(s) of Previous Violation(s)	03/01/2016
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