



pennsylvania
DEPARTMENT OF HUMAN SERVICES

JAN 24 2019

Mr. Adam Herman
Administrator/Owner
Riverstone Manor LLC
PO 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's Bureau of Human Services Licensing annual inspection on September 7, 2018 of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report 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 "Jacqueline L. Rowe".

Jacqueline L. Rowe
Director

Enclosure
Violation Report

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

PCF Name: RIVERSTONE MANOR		License Number: 22394
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 1-1 03/15/2012 Walnutport Borough		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 60	Working Staff: 45
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 09/07/2018: Novak, Ryan; Valence, Duano; DeVries, Kristin		
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: 60	Receive Supplemental Security Income: 41	
Secured Dementia Care Unit in Home: No	Are 60 Years of Age or Older: 29	
Area:	Have Mental Illness: 45	
Secured Dementia Unit Capacity, if Applicable:	Have an Intellectual Disability: 11	
Number of Residents Served in Secured Dementia Care Unit, if applicable:	Have a Mobility Need: 0	
Number of Current Hospice Residents: 0	Have a Physical Disability: 1	
Number of Hospice Residents in past year: 1		

Violation Report: 22394 - 09/07/2018 - Novak, Ryan
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600
2600.3(c) - The personal care home shall post the current license, a copy of the current licensing inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

2a. DESCRIPTION OF VIOLATION
The licensing inspection summaries dated 9/13/17 & 12/12/17 were not posted in the home. The binder used to store the summaries was not labeled to easily identify the reports without having to ask where the reports were posted.

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.

Pls see p 2A.

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Anganette Kattner*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Anganette Kattner Administrator* Date *12-1-2018*

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

The above plan of correction is approved as of 1-2-19
(Date)

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

Plan of correction implementation status as of 1-2-19
(Date)

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

P2A 88

2600.3(c)

The regulation is important because it allows residents and families to stay informed of the compliance status of the home.

The regulation was violated because the inspector was unable to identify the book and two reports were missing.

The violation was caused by an oversight of reports and a missing label.

The violation reports were immediately added to the binder/book and a label placed on the binder that reads violations.

The binder will be checked monthly to ensure that the label is still in place and no reports are missing.

The administrator will be responsible for ongoing compliance.

Anjanette Kattner

Anjanette Kattner, Administrator
10-1-2018

JP.

1-2-19

Violation Report: 22394 - 09/07/2018 - Novak, Ryan
PCH Name: RIVERSTONE MANOR

1. REGULATION 56 Pa.Code §2600
2600.25(c)(4) - The contract shall specify the party responsible for payment.

2a. DESCRIPTION OF VIOLATION
Resident #1's contract was not updated to reflect that Riverstone Manor is now the resident's payer.

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.

P/s see p 3 A

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

Signature of Legal Entity Representative
(Required on EVERY Page) *[Handwritten Signature]*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Margarete Kothner Administrator* Date *10-1-2018*

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

The above plan of correction is approved as of 1-2-19
(Date)

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

Plan of correction implementation status as of 1-2-19
(Date)

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

2600.25(c)(4)

p 3A g 8

The regulation is important to eliminate the possibility of disputes over who is responsible for payments.

The regulation was violated because the contract was not updated to reflect that Riverstone Manor had taken over as the rep payee upon the family's request.

An updated addendum was added to the contract and all files were audited for the need of such an addendum and handled accordingly.

yes

An addendum was written into the contract for future residents addressing changes in the rep payee to avoid future violations.

The administrator will be responsible for ongoing compliance.

Anjanette Kattner

Anjanette Kattner, Administrator
10-1-2018

Q. 1-2-19

Violation Report: 22394 - 09/07/2018 - Ncvak, Ryan
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600

2600.41(c) - The Department's poster of the list of resident's rights shall be posted in a conspicuous and public place in the home.

2a. DESCRIPTION OF VIOLATION

The Department's resident's rights poster is not posted in a conspicuous and public place in the 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.

Pls see p 4A

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

Anjanette Kothner

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

Anjanette Kothner, Administrator

Date

10-1-2018

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1-2-19
(Date)

Plan of correction implementation status as of

1-2-19
(Date)

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

The above plan of correction was approved by

(Signature)
(Initials)

2600.41 (c)

P4A38

The regulation is important so that the residents always have unencumbered access t a list of their rights.

The regulation was violated because the list of resident's rights were taken from the bulletin board.

The rights were immediately hung back up and a staff meeting held the next week to educate the staff to look for missing items from the bulletin boards so they can be replaced in a timely fashion.

The administrator will be responsible to ensure ongoing compliance.

~~Anjanette Kathner~~

Anjanette Kathner
Administrator

Op.

1-2-19

10-1-2018

Violation Report: 22394 - 09/07/2018 - Novak, Ryan
PCA Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §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.

2. DESCRIPTION OF VIOLATION
The thermometer located in the Kenmore chest freezer was not readable to determine the temperature.

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.

Pls see p 5 A

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

Signature of Legal Entity Representative
(Required on EVERY Page) *[Handwritten Signature]*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Uniquette Kothner Administrator* Date *10-1-2018*

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

The above plan of correction is approved as of 1-2-19
(Date)

Plan of correction implementation status as of 1-2-19
(Date)

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

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

2600.103(f)

p 5A g 8

The regulation is important as it insures safe food handling and storage.

The regulation was violated by the fact that the thermometer was fogged over and hard to read.

A new thermometer was bought the next day and placed in the freezer. Additional thermometers were bought to avoid this problem in the future.

Thermometers are checked when temperatures are checked in the refrigerators/freezers. Staff will now sign off that thermometers are in working condition when they sign off on temperatures. Additional thermometers are now on premise if others become difficult to read.

The administrator will be responsible for ongoing compliance in the future.

Q. 1-2-19

~~Anjanette Kather~~

Anjanette Kather
Administrator

10-1-2018

Violation Report: 22394 - 09/07/2018 - Novak, Ryan
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600
2600.123(b) - Copies of the emergency procedures as specified in § 2600.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.

2a. DESCRIPTION OF VIOLATION
The home's emergency procedures and the local municipalities are not posted in a conspicuous and public place in the 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.

Pls see p 6A

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

Signature of Legal Entity Representative
(Required on EVERY Page) *Ursula Kather*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Ursula Kather* Date *10-1-2018*

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

The above plan of correction is approved as of 1-2-19
(Date)

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

Plan of correction implementation status as of 1-2-19
(Date)

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

2600.12(b) 1 2 3 (b)

Plc A g 8

The regulation is important so that someone other than staff can respond in an emergency situation if necessary.

The regulation was violated because the actual emergency preparedness binder was not located in the foyer next to the instructions on the wall.

A copy of the binder was made and put in the foyer labeled emergency preparedness.

The administrator will be responsible for ongoing compliance in the future.

Q. 1-2-19

Anyanette Kattner

Anyanette Kattner

10-1-2018

Violation Report: 22394 - 09/07/2018 - Novak, Ryan
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600
2600.132(e) - A fire drill shall be held during sleeping hours once every 6 months.

2a. DESCRIPTION OF VIOLATION
The home's fire drill log indicates that the two most recent sleeping-hour fire drills took place 7/13/17 at 6:26am and 3/3/18 at 5:49am. The home did not conduct a sleeping-hour fire drill every 6 months as specified by the regulation.

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.

Pls see p 7 A

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

Signature of Legal Entity Representative
(Required on EVERY Page) *[Handwritten Signature]*

Printed Name and Title of Legal Entity Representative
(Required on EVERY Page) *Monique Kather* Date *10-1-2018*

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

The above plan of correction is approved as of 1-2-19
(Date)

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

Plan of correction implementation status as of 1-2-19
(Date)

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

2600.132(e)

P7A 98

The regulation is important because it allows staff and residents to have a true readiness should an emergency ever arise.

The regulation was violated because a sleeping hours fire drill was not done within the 6-month time frame.

A sleeping hours fire drill was immediately planned and subsequently carried out.

In the future a quality check of the fire drill log will be done monthly to insure sleeping hour fire drills are done in the correct time frame.

The administrator will be responsible for ongoing future compliance.

Q. 1-2-19

~~Anjanette Kattner~~

Anjanette Kattner
Administrator
10-1-2018

Violation Report: 22394 - 09/07/2018 - Novak, Ryan
PCH Name: RIVERSTONE MANOR

1. REGULATION 55 Pa.Code §2600

2600.161(d) - A resident's special dietary needs as prescribed by a physician, physician's assistant, certified registered nurse practitioner or dietitian shall be met. Documentation of the resident's special dietary needs shall be kept in the resident's record.

2a. DESCRIPTION OF VIOLATION

Resident #1's most recent DME lists the resident's special dietary needs as no added sodium and no concentrated sweets. Resident's most recent RASP dated 10/17/17 does not list these special dietary needs nor how the home will address these needs.

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.

pls see p 8A

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative
(Required on EVERY Page)

[Handwritten Signature]

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

Diana Kothor Administrator

Date

11-1-2018

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

The above plan of correction is approved as of

1-2-19
(Date)

Plan of correction implementation status as of

1-2-19
(Date)

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

The above plan of correction was approved by

[Handwritten Initials]
(Initials)

2600.161(d)

P 8A 98

The regulation is important to assure that residents maintain dietary needs for healthy living.

The regulation was violated because the DME had special dietary instructions listed that no other forms (ie: MA-51, RASP, etc.) had listed.

The doctor who filled out the forms was called and consulted. He confirmed that the DME was an error. He examined the resident the following week and filled out all new medical forms.

In the future forms will be checked against each other to ensure that the information matches as well as to make sure that all the information is filled in.

The administrator will be responsible for continued compliance in the future.

Q.
1-2-19

~~Anjanette Kattner~~
Anjanette Kattner
Administrator
10-1-2018