

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY PUBLIC

June 16, 2023

[REDACTED], ADMINISTRATOR
RIVERTON OPERATOR LLC
[REDACTED]

RE: RIVERTON ENHANCED SENIOR
LIVING
803 NORTH WAHNETA STREET
ALLENTOWN, PA, 18109
LICENSE/COC#: 23044

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/24/2023, 01/26/2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: RIVERTON ENHANCED SENIOR LIVING License #: 23044 License Expiration: 01/24/2023
Address: 803 NORTH WAHNETA STREET, ALLENTOWN, PA 18109
County: LEHIGH Region: NORTHEAST

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: RIVERTON OPERATOR LLC
Address: [REDACTED]
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 06/25/1993 Issued By: L&I
Type: C-2 LP Date: 12/15/2004 Issued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 39 Waking Staff: 29

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
Reason: Renewal, Complaint Exit Conference Date: 01/26/2023

Inspection Dates and Department Representative

01/24/2023 - On-Site: [REDACTED]
01/26/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
License Capacity: 90 Residents Served: 32
Secured Dementia Care Unit
In Home: No Area: Capacity: Residents Served:
Hospice
Current Residents: 1
Number of Residents Who:
Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 32
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 7 Have Physical Disability: 0

Inspections / Reviews

01/24/2023 Full
Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/10/2023

Inspections / Reviews *(continued)*

05/02/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/09/2023

Reviewer: [REDACTED]

Follow Up Type: POC Submission

Follow Up Date: 02/28/2023

06/13/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/16/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 06/16/2023

06/16/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/16/2023

Reviewer: [REDACTED]

Follow Up Type: Not Required

17 - Record Confidentiality

1. Requirements

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.

Description of Violation

The Resident Privacy coding was attached to the licensing inspection summary dated 8/18/2021, which was located in a binder near the home's entrance and accessible to the public.

Plan of Correction

Accept ([redacted] - 06/13/2023)

The privacy coding was removed immediately from DHS binder available to the public on 1/24/2023 and ED will be review audits weekly.

Licensee's Proposed Overall Completion Date: 06/13/2023

Implemented ([redacted] - 06/16/2023)

141b1 - Annual Medical Evaluation

2. Requirements

2600.

141.b.1. A resident shall have a medical evaluation: At least annually.

Description of Violation

Resident #1's most recent medical evaluation was completed on [redacted]. The resident's previous medical evaluation was completed on [redacted].

Plan of Correction

Accept ([redacted] - 06/13/2023)

DOW was educated on DME dates and required due dates to comply with DHS regulations on January 24th 2023 and the home completed an audit that involved DME's on 1/26 and DOW and ED will complete quarterly checks.

Licensee's Proposed Overall Completion Date: 06/13/2023

Implemented ([redacted] - 06/16/2023)

183d - Prescription Current

3. Requirements

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

The home had [redacted] cream for Resident #2. These medications are not currently prescribed for Resident #2.

Plan of Correction

Accept ([redacted] - 06/13/2023)

PLAN of corrections action plan.

183d- Description of Violation

The home had [redacted] and [redacted] for Resident #2. These medications are not currently prescribed for Resident #2.

- DOW/Administrator or designee will audit Medication delivery daily for 7 days to verify that the correct

183d - Prescription Current (continued)

medication per order has been delivered, followed by DOW/Administrator or designee continuing to audit medication order/delivery weekly for a period of 90 days.

- New Order listing report to be given to CMT to compare new orders with delivery label prior to signing for medications. -
- Cart Audit to be performed weekly by CMT, DOW to review and address discrepancies with pharmacy weekly for a period of 90 days.
- Pharmacy medication/order audit to be completed monthly by (Med WIZ) to ensure proper transcription of medication order vs. delivery medication, until 3 months consecutive zero transcription error reviews.
- Education with all staff to understand how to read a MAR and TAR correctly.
- Written Warning/ Educations Given to all Med-Tec.

Resident is no longer at the facility.

Licensee's Proposed Overall Completion Date: 06/13/2023

Implemented ([redacted]) - 06/16/2023)

184a - Resident's Meds Labeled

4. Requirements

2600.

184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

Description of Violation

Resident #2 is prescribed [redacted]. The medication label states to administer one tablet 1x per day. The current order states to administer to administer one tablet 1x per day.

Resident #2 is prescribed [redacted]. The current order states to administer two tablets 3x per day. The medication label contains the PRN order only and is not labeled with the aforementioned straight order.

Resident #3 is prescribed [redacted]. The medication label states to administer one tablet 2x per day. The current order states to administer one tablet 3x per day.

Plan of Correction

Accept ([redacted]) - 06/13/2023)

184a-Description of Violation

Resident #2 is prescribed [redacted]. The medication label states to administer one tablet 1x per day. The current order states to administer to administer one tablet 1x per day.

- DOW/Administrator or designee will audit Medication delivery daily for 7 days to verify that the correct medication per order has been delivered, followed by DOW/Administrator or designee continuing to audit medication order/delivery weekly for a period of 90 days.
- New Order listing report to be given to CMT to compare new orders with delivery label prior to signing for medications. -
- Cart Audit to be performed weekly by CMT, DOW to review and address discrepancies with pharmacy weekly for a period of 90 days.
- Pharmacy medication/order audit to be completed monthly by (MED WIZ) to ensure proper transcription of medication order vs. delivery medication, until 3 months consecutive zero transcription error reviews.

Resident #2 is prescribed Acetaminophen 650mg. The current order states to administer two tablets 3x per day. The medication label contains the PRN order only and is not labeled with the aforementioned straight order.

184a - Resident's Meds Labeled (continued)

- DOW/Administrator or designee will audit Medication delivery daily for 7 days to verify that the correct medication per order has been delivered, followed by DOW/Administrator or designee continuing to audit medication order/delivery weekly for a period of 90 days.
 - New Order listing report to be given to CMT to compare new orders with delivery label prior to signing for medications. -
 - Cart Audit to be performed weekly by CMT, DOW to review and address discrepancies with pharmacy weekly for a period of 90 days.
 - Pharmacy medication/order audit to be completed monthly by (MED WIZ) to ensure proper transcription of medication order vs. delivery medication, until 3 months consecutive zero transcription error reviews.
 - Education with all staff to understand how to read a MAR and TAR correctly.
- Resident #3 is prescribed [REDACTED]. The medication label states to administer one tablet 2x per day. The current order states to administer one tablet 3x per day.
- DOW/Administrator or designee will audit Medication delivery daily for 7 days to verify that the correct medication per order has been delivered, followed by DOW/Administrator or designee continuing to audit medication order/delivery weekly for a period of 90 days.
 - New Order listing report to be given to CMT to compare new orders with delivery label prior to signing for medications. -
 - Cart Audit to be performed weekly by CMT, DOW to review and address discrepancies with pharmacy weekly for a period of 90 days.
 - Pharmacy medication/order audit to be completed monthly by (Med Wiz) to ensure proper transcription of medication order vs. delivery medication, until 3 months consecutive zero transcription error reviews.

Licensee's Proposed Overall Completion Date: 06/13/2023

Implemented [REDACTED] - 06/16/2023)

185a - Implement Storage Procedures

5. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

The home uses a "house" glucometer to use to measure blood sugars for residents who do not have a glucometer. The house glucometer was used to measure the blood sugar for Resident #4 on 1/24/2022 at 11:00am.

Plan of Correction

Accept (JH - 06/13/2023)

House glucometers thrown out immediately and staff was educated on January 24th 2023 and DOW and ED will audit med cart so there's no house glucometers.

Licensee's Proposed Overall Completion Date: 06/13/2023

Implemented [REDACTED] - 06/16/2023)

187a - Medication Record

6. Requirements

2600.

187a - Medication Record (*continued*)

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

Description of Violation

Resident #4 receives blood sugar readings 3x daily. Resident #4's medication record (MAR) has a blood sugar reading of [REDACTED] for date [REDACTED] at [REDACTED]. However, this reading could not be located in the resident's glucometer.

Plan of Correction

Accept [REDACTED] - 06/13/2023)

187a-Description of Violation

Resident #4 receives blood sugar readings 3x daily. Resident #4's medication record (MAR) has a blood sugar reading of [REDACTED] for date [REDACTED] at [REDACTED]. However, this reading could not be in the resident's glucometer.

- Create Glucometer logbook, test Glucometers daily on 11-7 and document reading by CMT.
- DOW/Administrator or designer to review daily for 7 days, followed by continuing to audit Glucometer log weekly for a period of 90 days.
- Education with all staff to understand how to read a MAR and TAR correctly Understanding how to enter all Blood sugar correctly, Educations given.
- Written Warning/ Educations Given to all Med-Tec.

Licensee's Proposed Overall Completion Date: 06/13/2023

Implemented [REDACTED] - 06/16/2023)

187d - Follow Prescriber's Orders

7. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #4 receives blood sugar readings 3x daily. Resident #4's medication record (MAR) has a blood sugar reading of [REDACTED] for date [REDACTED] at [REDACTED]. However, this reading could not be located in the resident's glucometer. It could not be verified that the resident's blood sugar reading occurred at this date and time.

Resident #4's blood sugar reading on [REDACTED] at [REDACTED] was [REDACTED], which required 2 units of sliding scale insulin coverage. Per the resident's MAR, no units of sliding scale insulin were administered.

Resident #5 is prescribed twice daily [REDACTED] with parameters to hold the medication if the resident's systolic blood pressure is less than [REDACTED]. On [REDACTED], Resident #5's systolic blood pressure measured [REDACTED] however, per the resident's MAR, the medication was administered when it should have been held.

Plan of Correction

Accept [REDACTED] - 06/13/2023)

187d-Description of Violation

Resident #4 receives blood sugar readings 3x daily. Resident #4's medication record (MAR) has a blood sugar reading of [REDACTED] for date [REDACTED] at [REDACTED]. However, this reading could not be located in the resident's glucometer. It could not be verified that the resident's blood sugar reading occurred at this date and time.

Resident #4's blood sugar reading on [REDACTED] at [REDACTED] was [REDACTED] which required 2 units of sliding scale insulin coverage. Per the resident's MAR, no units of sliding scale insulin were administered.

- CMT staff will be re-educated on medication/order guidelines regarding sliding scale coverage, until all CMT staff are completed. DOW/Administrator to have completed by 2/28/2023.

187d - Follow Prescriber's Orders (continued)

- Education provided by DOW/Administrator to the CMT who failed to provide proper medication dose. Progressive disciplinary action as directed by Community Handbook
- DOW/Administrator to review PCC order requirement for mandatory documentation for insulin needed for SSC based on BGM reading.

Resident #5 is prescribed twice daily [REDACTED] with parameters to hold the medication if the resident's systolic blood pressure is less than [REDACTED]. On 1/12/23, Resident #5's systolic blood pressure measured [REDACTED]; however, per the resident's MAR, the medication was administered when it should have been held.

- Education provided to the CMT who administered medication outside of perimeters. Progressive disciplinary action as directed by Community Handbook to be completed by 2/28/2023
- Education provided to all CMT's on blood pressure perimeters by 2/28/2023 followed by quarterly educations x 2 quarters.
- Educate all newly employed CMT's on blood pressure perimeters upon hire and quarterly x 2 quarters.

Understanding how to read a Blood pressure parameter on a MAR.

Education.

When reading blood pressure parameters on a MAR, Always Read Both Numbers

Example: If an order reads

hold for SBP < 110 and OR HR < 60.

and you have a Blood pressure reading of 110/59.

The medication needs to be held.

Regardless of what number is lower, per parameters as it states on the MAR you must hold the medication.

Licensee's Proposed Overall Completion Date: 06/13/2023

Implemented ([REDACTED] - 06/16/2023)

227d - Support Plan Medical/Dental

8. Requirements

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

Resident #6's assessment and support plan (RASP) is dated [REDACTED]. The Behavioral/Cognitive Needs section of the RASP was blank/incomplete.

Plan of Correction

Accept ([REDACTED] - 06/13/2023)

Support plan corrected on site on January [REDACTED] and shown to surveyor immediately. Audit completed to make sure nothing else was missing and ED and DOW will complete audits quarterly to make sure nothing is missing.

Licensee's Proposed Overall Completion Date: 06/13/2023

Implemented ([REDACTED] - 06/16/2023)