

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

March 6, 2024

[REDACTED], ADMINISTRATOR
RIVERCLIFF TERRACE INC
[REDACTED]

RE: RIVERCLIFF TERRACE ANNEX
322 NORTH MCKEAN STREET
KITTANNING, PA, 16201
LICENSE/COC#: 42693

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/08/2024 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: RIVERCLIFF TERRACE ANNEX License #: 42693 License Expiration: 04/13/2024
 Address: 322 NORTH MCKEAN STREET, KITTANNING, PA 16201
 County: ARMSTRONG Region: WESTERN

Administrator

Name: [REDACTED]

Legal Entity

Name: RIVERCLIFF TERRACE INC
 Address: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 07/10/1983 Issued By: DEPT L & I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 18 Waking Staff: 14

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
 Reason: Renewal Exit Conference Date: 02/08/2024

Inspection Dates and Department Representative

02/08/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 28 Residents Served: 18
 Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:
 Hospice
 Current Residents: 0
 Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 18
 Diagnosed with Mental Illness: 8 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

02/08/2024 Full
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 03/03/2024

03/06/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 03/06/2024
 Reviewer: [REDACTED] Follow-Up Type: Bypass Document Submission

Inspections / Reviews *(continued)*

03/06/2024 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/06/2024

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

25b - Contract Signatures

1. Requirements

2600.

25.b. The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

Description of Violation

Resident #1's contract, completed [REDACTED], does not indicate the date that the resident signed the contract.

Plan of Correction

Accepted [REDACTED] - 03/06/2024)

The "New Resident Checklist" included a "Contract Signed" checkbox. This was updated to read "Contract Signed and Dated" on February 9, 2024 to ensure all dates are entered on all contracts. This violation was verbally communicated to Direct Care Staff by [REDACTED], the administrator, on February 8-9th, 2024, although this is not their responsibility. This item is the responsibility of myself, the administrator. Once all items on the new resident checklist have been completed I, [REDACTED], will sign and date the "New Resident Checklist" to verify all information has been completed. [The administrator will complete an audit by 4/05/2024 of all resident records to ensure that each resident has a current signed contract in place. Any contract without the required signatures will be corrected.]

Licensee's Proposed Overall Completion Date: 03/01/2024

Implemented [REDACTED] - 03/06/2024)

82a - Poisonous Materials

2. Requirements

2600.

82.a. Poisonous materials shall be stored in their original, labeled containers.

Description of Violation

An unlabeled, [REDACTED], that was $\frac{3}{4}$ -filled with a clear liquid, and identified by staff as "cleaner," was stored on the shelf of the housekeeping closet on the second floor of the home. However, the container was not the original bottle by the manufacturer and the manufacturer's poison label was not on the spray bottle.

Plan of Correction

Accepted [REDACTED] - 03/06/2024)

All employees were verbally informed on February 8-9th by the administrator [REDACTED], that no cleaning products, or any other poisonous materials, may be removed from their original containers and placed in spray bottles or any other type of container. If it is preferred that cleaners are in spray bottles they must be purchased that way. Also, a poster was placed in all cleaning supply storage areas on February 9th that remind staff that cleaners must stay in their original packaging. Each cleaning supply storage area will be checked weekly by an employee. A checklist has been created and will be signed verifying that each supply storage area has been checked weekly and does not contain any bottles that are not in original packaging. This procedure began on February 15th, one week after the areas were checked during inspection. For the month of February these checks have been done by the administrator to ensure that the regulation is being followed. In the future this responsibility will be given to an employee and I will sign off that the checks have been made and do periodic checks of the storage areas to ensure the regulation is being followed.

Licensee's Proposed Overall Completion Date: 03/01/2024

82a - Poisonous Materials (continued)

Implemented (█) - 03/06/2024)

184a - Resident's Meds Labeled

3. 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 █ eye drops in left eye once daily, however, the medication's pharmacy label indicated both eyes daily.

Plan of Correction

Accept (█) - 03/06/2024)

The resident was previously prescribed for this to be used in both eyes and instructions had changed 8 days prior to inspection. A new bottle of the same medication had been sent with the updated instructions on the label to only use in the left eye, but the previous bottle was being finished first. A "Change of Instructions - See Chart" label should have been placed on this bottle until the new bottle was opened. All Medication Administration staff were informed of this verbally by Jennifer Luffey, the administrator, on February 8-9th. A form was created on February 9th that ensures a "Change of Instructions - See Chart" sticker is placed on any medication that has instructions changed, but the medication itself had not been changed. The person responsible for the placement of the sticker is the Medication Administration staff person who enters the new instructions in the MAR. This document will be given to me, the administrator, after it is completed to verify the task has been completed.

Licensee's Proposed Overall Completion Date: 03/01/2024

Implemented (█) - 03/06/2024)

184b - Labeling OTC/CAM

4. Requirements

2600.

184.b. If the OTC medications and CAM belong to the resident, they shall be identified with the resident's name.

Description of Violation

Resident #1 was prescribed █ tablet by mouth daily and █ capsule by mouth once per day as needed for constipation. However, the over-the-counter medication is not labeled with the resident's name or identifying initials.

Plan of Correction

Accept (█) - 03/06/2024)

These medications were stored in a bin with the resident's name on it, but the bottles should also have been labeled with their name. All Medication Administration staff were verbally informed by █, the administrator, of this violation on February 8-9th. A form was created on February 9th for use with all OTC medications when they arrive at the facility. This will be completed by the Medication Administration staff that receives the medication. This form will be given to the administrator upon completion so I know the medications have been properly labeled.

Licensee's Proposed Overall Completion Date: 03/01/2024

Implemented (█) - 03/06/2024)

184b - Labeling OTC/CAM *(continued)*