

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

February 28, 2023

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 05/06/2022, 05/09/2022 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,

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

**Name:** RIVERTON ENHANCED SENIOR LIVING      **Licen e #:** 23044      **Licen e 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**

<b>Type:</b> C-2 LP	<b>Date:</b> 06/25/1983	<b>Issued By:</b> L&I
<b>Type:</b> C-2 LP	<b>Date:</b> 07/26/1989	<b>Issued By:</b> L&I
<b>Type:</b> C-2 LP	<b>Date:</b> 05/18/1983	<b>Issued By:</b> L&I

**Staffing Hours**

**Resident Support Staff:** 0      **Total Daily Staff:** 27      **Waking Staff:** 20

**Inspection Information**

**Type:** Partial      **Notice:** Unannounced      **BHA Docket #:** [REDACTED]  
**Reason:** Complaint, Monitoring      **Exit Conference Date:** 05/09/2022

**Inspection Dates and Department Representative**

05/06/2022 - On-Site: [REDACTED]

05/09/2022 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates****General Information**

**Licen e Capacity:** 90      **Re ident Served:** 26

**Secured Dementia Care Unit**

**In Home:** No      **Area:**      **Capacity:**      **Re ident Served:**

**Hospice**

**Current Re ident :** 0

**Number of Residents Who:**

**Receive Supplemental Security Income:** 0      **Are 60 Years of Age or Older:** 26

**Diagnosed with Mental Illness:** 0      **Diagnosed with Intellectual Disability:** 0

**Have Mobility Need:** 1      **Have Physical Disability:** 0

**Inspections / Reviews**

05/06/2022 Partial

**Lead Inspector:** [REDACTED]

**Follow-Up Type:** POC Submission

**Follow-Up Date:** 06/11/2022

## 07/15/2022 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/10/2022

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 07/22/2022

## 01/24/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 07/22/2022

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 01/31/2023

## 02/28/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/28/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

## 25c12 - Bed Hold

**1. Requirements**

2600.

25.c. At a minimum, the contract must specify the following:

12. Charges to the resident for holding a bed during hospitalization or other extended absence from the home.

**Description of Violation**

*The resident-home contract, dated █ 22, for resident #1 does not include the charges for holding a bed during an absence.*

**POC Submission****Accept █ - 08/29/2022***Charges added by billing department when DHS was onsite.**Who will be responsible for ongoing compliance?**Billing Manager will be responsible for adding charges**How will future violations be prevented?**Administrator will complete yearly audit***Licensee's Plan Completion Date:** 07/22/2022**Implemented █ - 02/28/2023**

## 86b - Bathroom

**2. Requirements**

2600.

86.b. A bathroom that does not have an operable, outside window shall be equipped with an exhaust fan for ventilation.

**Description of Violation**

*Resident room █ bathroom does not have an operable window or ventilation fan. The ventilation fan is inoperable and there is no window in the bathroom.*

**POC Submission****Accept █ - 08/29/2022***Maintenance corrected day of inspection.**Who will be responsible for ongoing compliance?**The Maintenance Director will be responsible for replacing ventilation fans if not working.**How will future violations be prevented?**Administrator will complete yearly audit***Licensee's Plan Completion Date:** 07/22/2022**Implemented █ - 02/28/2023**

## 133.1 - Exit Signs

**3. Requirements**

2600.

133.1. Exit Signs - The following requirements apply for a home serving nine or more residents: Signs bearing the word "EXIT" in plain legible letters shall be placed at all exits.

**Description of Violation**

*There is no exit sign over the dining room exit door. The home currently serves 26 residents.*

133.1 - Exit Signs (*continued*)

## POC Submission

Accept [REDACTED] - 08/29/2022

*Maintenance corrected day of inspection**Who will be responsible for ongoing compliance?**Maintenance will be responsible for placing exit signs when renovations are complete and before a move in.**How will future violations be prevented?**Administrator will complete yearly audit.*

Licensee's Plan Completion Date: 07/21/2022

Implemented [REDACTED] - 02/28/2023

## 141a 1-10 Medical Evaluation Information

## 4. Requirements

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:

1. A general physical examination by a physician, physician's assistant or nurse practitioner.
2. Medical diagnosis including physical or mental disabilities of the resident, if any.
3. Medical information pertinent to diagnosis and treatment in case of an emergency.
4. Special health or dietary needs of the resident.
5. Allergies.
6. Immunization history.
7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
8. Body positioning and movement stimulation for residents, if appropriate.
9. Health status.
10. Mobility assessment, updated annually or at the Department's request.

## Description of Violation

*Resident #1's medical evaluation did not include height or health status.*

## POC Submission

Accept [REDACTED] 08/29/2022

*Correction was made on site when DHS was in the building.**Who will be responsible for ongoing compliance?**Director of wellness**How will future violations be prevented?**Administrator will complete yearly audit*

Licensee's Plan Completion Date: 07/22/2022

Implemented [REDACTED] 02/28/2023

## 171b5 - First Aid Kit

## 5. Requirements

2600.

171.b. The following requirements apply whenever staff persons or volunteers of the home provide transportation for the resident:

5. The vehicle must have a first aid kit with the contents as specified in § 2600.96 (relating to first aid kit).

## 171b5 - First Aid Kit (continued)

**Description of Violation**

*The first aid kit in the home's bus used to transport residents does not include tweezers, mouth shield or eye shield.*

**POC Submission**

Accept █ - 08/29/2022

*Maintenance corrected day of inspection and placed new first aid kit in the van.*

*Who will be responsible for ongoing compliance?*

*Administrator will be responsible*

*How will future violations be prevented?*

*Administrator will complete yearly audit*

**Licensee's Plan Completion Date:** 07/22/2022

Implemented █ - 02/28/2023

## 185a Implement Storage Procedures

**6. 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**

*Resident #3 was dispense a █ 30 pill pack from the pharmacy on █/22. On █/22 there were 3 pills missing from the medication package, but no documentation that those 3 pills were dispense.*

**POC Submission**

Accept █ 08/28/2022

*Administrator educated staff on PRN requirements as per the Medication administration course when giving PRN's and documenting them.*

*Director of wellness is responsible for ongoing compliance.*

**Licensee's Plan Completion Date:** 07/22/2022

Implemented █ - 02/28/2023

## 186c - Change in Medications

**7. Requirements**

2600.

186.c. Changes in medication may only be made in writing by the prescriber, or in the case of an emergency, an alternate prescriber, except for circumstances in which oral orders may be accepted by nurses in accordance with regulations of the Department of State. The resident's medication record shall be updated as soon as the home receives written notice of the change.

**Description of Violation**

*On █/22 medication tech A took a verbal order for 10 units of insulin for resident #1. The home had not received a written order from an authorized prescriber for the change and does not have a registered nurse on duty to receive verbal orders.*

**POC Submission**

Accept █ - 08/29/2022

*Director of wellness educated med techs on written orders and the requirements for transcribing.*

*Director of wellness is responsible for ongoing compliance and the Administrator will complete Audits quarterly.*

186c - Change in Medications (*continued*)

Licensee's Plan Completion Date: 07/22/2022

Implemented ( █ - 02/28/2023)

## 187a Medication Record

## 8. Requirements

2600.

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

## Description of Violation

Resident #1 is prescribed █. This medication was administered on █/22 at █ am; however, it did not include the number of units dispense to resident #1's medication administration record.

POC Submission

Accept ( █ 08/29/2022)

Director of wellness educated nursing staff on medication administration and staff assigned to diabetic training with Northampton community college.

Director of wellness is responsible and the Administrator will complete ongoing audits.

Licensee's Plan Completion Date: 07/22/2022

Implemented ( █ 02/28/2023)

## 227d - Support Plan Medical/Dental

## 9. 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

The assessment for resident #1, dated █/22, does not indicate the resident's level of supervision, mobility and medication needs. The resident's support plan, dated █/22 does not document how this need will be met.

POC Submission

Accept ( █ 08/29/2022)

Administrator educated Director of wellness and RASP was compete immediately.

Who will be responsible for ongoing compliance?

Director of wellness and administrator

How will future violations be prevented?

Administrator will complete yearly audit

Licensee's Plan Completion Date: 07/22/2022

Implemented ( █ - 02/28/2023)

## 252 - Record Content

## 10. Requirements

2600.

252 - Record Content (*continued*)

252. Content of Resident Records - Each resident's record must include the following information:

**Description of Violation**

*Resident #1 and #2's record does not include identifying marks.*

**POC Submission**

*Accept ( [REDACTED] - 08/28/2022)*

*Corrected when DHS was on site by Administrator, printed and filed in residents chart.*

*Administrator and director of wellness will be responsible with this area and will conduct quarterly audits.*

**Licensee's Plan Completion Date:** 07/22/2022

*Implemented ( [REDACTED] - 02/28/2023)*