



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

JUN 25 2014

Ms. Kisha Lester-Dennis, Administrator  
Riddle Village, Inc.  
1048 West Baltimore Pike  
Media, Pennsylvania 19063

RE: Inne at Riddle Village  
Monticello Building, Floors 1-3  
License #: 192510

Dear Ms. Lester-Dennis:

As a result of the Department of Public Welfare's licensing inspection on April 1, 2014 and April 2, 2014, 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.

Your regular license for the period June 20, 2014 to June 20, 2015 was issued on April 8, 2014. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink, appearing to read "Matthew J. Jones", with a long horizontal flourish extending to the right.

Matthew J. Jones  
Director

Enclosure  
License Inspection Summary

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

PCH Name: INNE AT RIDDLE VILLAGE THE		License Number: 19251
Address: 1048 WEST BALTIMORE PIKE, MEDIA, PA 19063		County: Delaware
Administrator: Kisha Lester-Dennis		Region: SOUTHEAST
Legal Entity Name: RIDDLE VILLAGE INC		
Legal Entity Address: 1048 WEST BALTIMORE PIKE, MEDIA, PA 19063		
Certificate(s) of Occupancy		
Other 07/24/2008 Township of Middletown	I-2 07/24/2008	
Staffing Hours		
Resident Support: 0	Total Daily Staff: 54	Waking Staff: 41
Type of Inspection: Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Renewal		
On-Site Inspections Dates and Department Representatives On-Site 04/01/2014: ; Keelty, Jennifer 04/02/2014: ; Keelty, Jennifer		
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: 76 Number of Residents Served: 52 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: 0	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 52 Have Mental Illness: 10 Have an Intellectual Disability: 4 Have a Mobility Need: 2 Have a Physical Disability: 4	

Violation Report: 19261 - 04/01/2014 - PCH Name: INNE AT RIDDLE VILLAGE THE	
1. REGULATION 55 Pa.Code §2600 2600.25(a)(1) - Prior to admission, or within 24 hours after admission, a written resident-home contract (contract) between the resident and the home shall be in place.	
2a. DESCRIPTION OF VIOLATION Resident # 1 admitted 1/21/2014, did not have a resident-home contract completed until 1/24/2014.	
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>Resident # 1. Admitted 1/21/2014, did not have a resident-home contract completed until 1/24/2014. This contract could not be changed; however all residents charts were reviewed. The DPW Contract will be given to all resident before Admission. This contract will be signed before Admission for the INNE AT Riddle Village. In-Addition the Supervisor of PCU who's responsibility (oversee's) the signing of the contract was in-service training was given to the Supervisor of this New change. This change was made; on <del>March</del><sup>May</sup> 2014, To Ensure this violation does not occur again, an Audit will be done quarterly and reported. The PCA will oversee progress with complying with 2600.25(a)(1)</p>	
Repeat Violation: Yes	Date(s) of Previous Violation(s): 02/08/2013
Signature of Legal Entity Representative (Required on EVERY Page)	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Nisha L. Dennis</i>	
Date: 5/14/14	
<b>DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!</b>	
The above plan of correction is approved as of <u>6/9/14</u> (Date)	Plan of correction implementation status as of <u>6/9/14</u> (Date)
The above plan of correction was approved by <u><i>CLM</i></u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

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regulation 55 Pa. Code 2600.25(a)(1)

The PCA will oversee progress with complying with 2600.25(a)(1) by checking the quarterly Audit. In services will also be given Annually a 12 hour personal care In service or as needed.

Kisha L. Dennis	02/20/2014
Kisha L. Dennis	02/20/2014

Violation Report: 19251 - 04/01/2014 -  
 PCH Name: INNE AT RIDDLE VILLAGE THE

1. REGULATION 58 Pa.Code §2600  
 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.

2a. DESCRIPTION OF VIOLATION  
 The contracts for residents # 1 and # 2 were not signed by the residents.

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 contracts for residents #1 and #2 were not signed by the residents but signed by the POA (Power of Attorney) which has the right of Power of Execution of Contracts. These residents were signed as "unable to sign" (wrong language written). These contracts could not be changed. The POA contract will be signed by all residents. The Inne at Riddle Village will strongly encourage all resident to sign a contract; A note will be written in the nurses note by the Supervisor of PCH if refusal occurs. This change will take place as of or has taken place on 6/19/14. All new admission to Riddle Village will be audited quarterly and reported to QAWA. The POA will oversee progress with complying with 2600.25(b).

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

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

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Nisha L. Dennis*      Date: *6/19/2014*

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The above plan of correction is approved as of <u>6/19/14</u> (Date)	Plan of correction implementation status as of <u>6/19/14</u> (Date)
The above plan of correction was approved by <u>Crem</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

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2000.25(b)

The PCA will oversee progress with complying with 2000.25(b) by checking the quarterly Audit. Insurances will also be given annually or as needed.

Nisha L. Dennis  
Nisha L. Dennis

0/20/2014  
0/20/2014

Violation Report: 19251 - 04/01/2014 - PCH Name: INNE AT RIDDLE VILLAGE THE	
<b>1. REGULATION 55 Pa.Code §2800</b> 2800.41(e) - A statement signed by the resident and, if applicable, the resident's designated person acknowledging receipt of a copy of the information specified in § 2800.41(d), or documentation of efforts made to obtain signature, shall be kept in the resident's record.	
<b>2a. DESCRIPTION OF VIOLATION</b> Resident #1's and resident # 2's record did not contain a statement signed by the resident acknowledging receipt of a copy of the resident rights and complaint procedures.	
<b>3. PLAN OF CORRECTION (POC)</b> (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.	
resident #1 and resident #2 did not contain a statement signed by the resident acknowledging receipt of a copy of the resident rights and complaints procedures. This document was signed by the POA of both resident. In addition the language written states "unable to sign." The resident right + Complaint procedure will be signed by all residents. Presently all resident right + complaint procedure comply with regulation 2800.41(e). May 1, 2014 education was given. The residents right + complaint procedure will be signed on admission and kept in the resident record. If the resident refuses to sign the supervisor will strongly encourage the resident to sign. If the resident should not sign a detail note will be placed in the chart. A quarterly Audit will be done and reported with PCH oversee progress.	
Repeat Violation: No	Date(s) of Previous Violation(s):
Signature of Legal Entity Representative (Required on EVERY Page) <i>Mark S. Deans</i>	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>Mark S. Deans</i>	Date <i>5/15/2014</i>
<b>DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!</b>	
The above plan of correction is approved as of <i>6/9/14</i> (Date)	Plan of correction implementation status as of <i>6/9/14</i> (Date)
The above plan of correction was approved by <i>DM</i> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

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2000.41(e)

The PFA will oversee progress by checking quarterly Audit, In services and mock survey will also be incorporated annually or as needed.

Kisha L. Dennis  
Kisha L. Dennis

5/20/2014  
5/20/2014

Violation Report: 19251 - 04/01/2014 -  
 PCH Name: INNE AT RIDDLE VILLAGE THE

1. REGULATION 55 Pa.Code §2800  
 2600.183(b) - Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

2a. DESCRIPTION OF VIOLATION  
 Resident # 3's Clotrimazole/Betamethasone Cream was located in the resident's room. The resident did not have a physician's order to self-administer this medication.

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.

Resident #3 medication was located in the resident room. The resident did not have a physician's order to self-administer. This resident did not have a physician order to self-administer this medication. <sup>envisaged</sup> <sup>subsequent</sup>  
 - Presently all resident that self administer medication have a physician's order.  
 This change was made on May 1st 2014. The home will be checked quarterly by the Night Supervisor via Audit. Findings of this Audit will be reported in Quarterly Q and A. Staff inserviceing will be given Annually to staff. The PCA will monitor or oversee to make sure this violation does not occur again.  
 PCA will check quarterly Audit, in addition education will be given Annually and as needed.

Repeat Violation: Yes      Date(s) of Previous Violation(s): 02/06/2013

Signature of Legal Entity Representative (Required on EVERY Page)  
*Nisha L. Davis*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)      Date  
 Nisha L. Davis      5/14/14

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The above plan of correction is approved as of <u>6/9/14</u> (Date)	Plan of correction implementation status as of <u>6/9/14</u> (Date)
The above plan of correction was approved by <u>ADM</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: 19251 - 04/01/2014 -  
 PGH Name: INNE AT RIDDLE VILLAGE THE

1. REGULATION 55 Pa.Code §2600  
 2600.183(d) - Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home

2a. DESCRIPTION OF VIOLATION  
 Loperamide HCL prescribed for resident # 4, that was discontinued on 3/10/2014, was located in the medication cart on 4/2/2014.

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.

Resident's Medication that was ordered for 3 days was left in cart, or has been  
 Presently, all medication that was discontinued is removed from cart. (Medication cart.) This was done while DPW was on site.  
 On May 13, 2014, the medication carts will be checked daily by the night supervisor. This supervisor will remove all discontinued meds.  
 Pharmacy reviews will be done quarterly by in house pharmacy. This review will be reported in Q+A.  
 Education will be given annually.  
 The PCA will oversee progress with this violation to comply with 2600.183(d) by initiating Med Survey Annually

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

Signature of Legal Entity Representative (Required on EVERY Page)  
*Nisha L. Dennis*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)      Date  
 Nisha L. Dennis      5/15/2014

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The above plan of correction was approved by <u>MEM</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: 19251 - 04/01/2014 -  
 PCH Name: INNE AT RIDDLE VILLAGE THE

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  
 Resident # 3's H2O2 eye drops had been previously discontinued, but were listed on the April medication administration record.

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.

*Resident's eye drops discontinued, but were still on Administration record. This violation was fixed ON site while DPW in building. Education on 2600.187A will be given. All MARs were checked. Currently, this home is in compliance with regulation 2600.187A. To continue to comply, The Night Supervisor will check all MARs with chart check. This audit will be reported quarterly to the Pharmacy reviews will be done quarterly and report to the PCA.*

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

Signature of Legal Entity Representative (Required on EVERY Page)

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

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The above plan of correction is approved as of <u>4/9/14</u> (Date)  The above plan of correction was approved by <u>ORM</u> (Initials)	Plan of correction implementation status as of <u>6/9/14</u> (Date) <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
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ADD

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The PCA will oversee by checking quarterly. Audit. Inservice  
will be given Annually or as needed. In addition  
Mock Survey will be incorporated Annually.

W. D. Lewis 5/20/2014

Violation Report: 19251 - 04/01/2014 -  
 PCH Name: INNE AT RIDDLE VILLAGE THE

1. REGULATION 55 Pa.Code §2600  
 2600.191 - The home shall educate the resident on the right to question or refuse a medication if the resident believes there may be a medication error. Documentation of this resident education shall be kept.

2a. DESCRIPTION OF VIOLATION  
 There is no documentation that resident # 1 and resident # 2 have been educated to the resident's right to refuse medication if the resident believes that there may be a medication error.

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.

Presently, the home is in compliance with this regulation. All New Admission were checked as of May 1st 2014.  
 To continue to comply the resident rights will be signed on Admission and kept in the resident chart.  
 The Supervisor of the home will encourage resident to sign the resident rights. If a resident refuses to sign a deficit note will be written in resident chart  
 A Quarterly review/audit will be done by the Nursing Supervisor. How reported quarterly in the Q and A meeting.  
 All findings will be reported to the PCA to oversee compliance with this regulation. Education on this regulation will be given.

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

Signature of Legal Entity Representative  
 (Required on EVERY Page)

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page)      Date: 5/14/2014

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The above plan of correction was approved by <u>DEM</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 19261 - 04/01/2014 -  
 PCH Name: INNE AT RIDDLE VILLAGE THE

1. REGULATION 65 Pa.Code §2600  
 2600.224(a) - A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

2a. DESCRIPTION OF VIOLATION  
 - Resident # 2, admitted to the home on 2/12/2014, had a preadmission screening completed on 1/10/2014, more than 30 days prior to admission.  
 - Resident # 4, admitted to the home on 7/16/2013, had a preadmission screening completed on 6/10/2013, more than 30 days prior to admission.

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 Pre Admission screenings were not completed in a timely fashion. (30 days)

Presently, all new Admissions are in Compliance with regulation 2600.224(a)

Staff Training will be given Annually, or as needed  
 Nursing Supervisor at night will check all New Admissions on chart check to make sure preAdmission is signed and dated correctly. This information will be given to PCA  
 PreAdmission screen will be done by Admission Nurse if not completed more than 30 days prior to Admission. This information will be reported in Quarterly Q+A. The PCA will oversee

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

Signature of Legal Entity Representative (Required on EVERY Page) *Nisha L. Dennis*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Nisha L. Dennis*      Date *5/14/14*

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The above plan of correction is approved as of <i>6/9/14</i> (Date)	Plan of correction implementation status as of <i>6/9/14</i> (Date)
The above plan of correction was approved by <i>ND</i> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

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2600.22 (a)

The PCA will oversee progress by checking the Nursing  
Supervisor Audit quarterly, also a mock survey will be  
done Annually, ~~before~~

Wendy A. Lewis 5/20/2014