



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: [REDACTED]
MAILING DATE: March 6, 2019

Mr. S. David Selznick
Vice President
1263 S Cedar Crest Blvd Senior Living I OPCO LLC
One Town Center Boulevard, Suite 300
Boca Raton, Florida 33486

RE: Rittenhouse Village at Lehigh Valley
1263 South Cedar Crest Boulevard
Allentown, Pennsylvania 18103
License #: 223010

Dear Mr. Selznick:

As a result of the Department's Bureau of Human Services Licensing inspection on December 12, 2018 of the above facility, the citations 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.

Sincerely,

A handwritten signature in black ink that reads "Anne Graziano".

Anne Graziano
Human Services Licensing Supervisor

Enclosure
Violation Report

LICENSING INSPECTION SUMMARY
PERSONAL CARE HOMES - 55 Pa.Code §2600

Name of Facility / Type(s) of Service:

Rittenhouse Village at Lehigh Valley

Street Address:

1263 South Cedar Crest Blvd.

City:

Allentown, PA

Zip Code:

18103

License Number:

223010

Type of Inspection:

Interim

Reason(s) for Inspection:

Settlement
Monitoring

Notice: None

On-site Inspection Dates and Department Representatives On-Site:

December 12, 2018

Ryan Novak
Amy Deluca

Off-Site Inspection Dates and Inspectors, if Applicable:

N/A

1. SETTLEMENT PROVISION #

10(a) Specialized dementia care training will be provided for all staff persons who work in the secured dementia care unit and all department heads within 60 days of the date of this Agreement and semi-annually thereafter. All new staff persons who work in the secured dementia care unit shall complete this specialized dementia care training within ten (10) days of hire. The training source will be the National Council of Certified Dementia Practitioners or another outside source approved by the Department.

2. DESCRIPTION OF VIOLATION

Direct care staff member A hired 10/18/18 did not receive training in specialized dementia care training until 10/29/18.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that each attached page must be signed and dated)

Include steps to describe the violation(s) 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.

A Specialized Dementia Care Training Audit was conducted to ascertain compliance with settlement provision 10(a). All direct care staff are compliant with the training requirements of this provision (attachment1).

Immediately and ongoing, Specialized Demntia Care Training will be included as part of new employee orientation. Specialized Dementia Care Training has been added to the orientation topics and training record (attachment 2). A Certified Dementia Practitioner will sign the training record upon completion. The Executive Director or designee will monitor completed orientation for compliance with established time frames. The administrator will oversee to ensure ongoing compliance.

Printed Name and Title of Legal Entity Representative (Required on all pages)

Andrea McGowan - Executive Director

Signature of Legal Entity Representative (Required on all pages)

Andrea McGowan

Date

12-28-18

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Repeated Violation:

Repeated Violation Dates:

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

The above plan of correction was approved by AG
(Initials)

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

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