



pennsylvania
DEPARTMENT OF HUMAN SERVICES

**Sent via e-mail to: dcressman@rittenhousesl.com
MAILING DATE: February 25, 2020**

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 Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on December 4, 2019 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

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

Anne Graziano
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: RITTENHOUSE VILLAGE AT LEHIGH VALLEY

License Number: 22307

Address: 1263 S CEDAR CREST BOULEVARD,, ALLENTOWN, PA 18103

County: LEHIGH

Region: NORTHEAST

Administrator

Name: Douglas Cressman

Phone: 6104339220

Email: dcressman@rittenhousesl.com

Legal Entity

Name: 1263 S CEDAR CREST BLVD SENIOR LIVING I OPCO LLC

Address: ONE TOWN CENTER BLVD, SUITE 300, BOCA RATON, FL, 33486

Certificate(s) of Occupancy

Type: I-1

Date:

Issued By:

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 107

Waking Staff: 80

Inspection

Type: Partial

BHA Docket #: 034-17-0010

Notice: Unannounced

Reason: Settlement

Inspection Dates and Department Representative

12/04/2019 - On-Site: Ryan Yankow

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 110

Residents Served: 77

Secured Dementia Care Unit

In Home: Yes

Area: n/a

Capacity: 34

Residents Served: 22

Hospice

Current Residents: 5

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 77

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 30

Have Physical Disability: 2

17 - Record Confidentiality

Regulations

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 9/10/19. The licensing inspection summary was posted in the lobby of the home. Th privacy coding document exposes confidential information of the residents.

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.)

Violation occurred due to privacy coding attached to licensing inspection summary posted in lobby.

Steps to address violation:

- 1. Privacy coding immediately removed at time of inspection and posted back in lobby.
- 2. When posting the inspection summary in lobby of the home, Attachment "A" will be completed by the Executive Director and designee to ensure compliance with 2600.17. Attachment "A" will be attached to the inspection summary that is posted in the lobby.

This plan of correction is submitted as required under State and/or Federal law. The submission of the Plan of Correction does not constitute an admission on the part of the Community as to the accuracy of the surveyor's findings or the conclusion drawn therefrom. Submission of this Plan of Correction also does not constitute an admission that the findings constitute a deficiency cited are correctly applied. Any changes to the community's policies and procedures should be considered subsequent remedial measures as that concept is employed in Rule 407 of the Federal Rules of Evidence, corresponding state rules of civil procedure and should be inadmissible in any proceeding on that basis. The community submits this plan of correction with the intention that it be inadmissible by any third party in any civil or criminal action against the Community or any employees, agent, officer, director, attorney, or shareholder of the community or affiliated companies.

Legal Entity Representative

Signature

Douglas Cressman Executive Director

2/14/20

Date

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The above plan of correction is approved as of 2-20-2020
(Date)

Plan of correction implementation status as of 2-20-2020
(Date)

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

- Implemented
- Not Implemented