

Department of Human Services
Bureau of Human Service Licensing

January 21, 2021

[REDACTED]
DISCOVERY READING LEASING LLC
27599 RIVERVIEW CENTER BLVD
SUITE 201
BONITA SPRINGS, FL 34134

RE: RITTENHOUSE VILLAGE AT
MUHLENBERG
2900 LAWN TERRACE
READING, PA, 19605
LICENSE/COC#: 22802

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/22/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Michele Moskalczyk
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: RITTENHOUSE VILLAGE AT MUHLENBERG **Licen e #:** 22802 **Licen e Expiration Date:** 05/01/2021
Addr e : 2900 LAWN TERRACE, READING, PA 19605
County: BERKS **Region:** NORTHEAST

Administrator

Name: [REDACTED] **Phone:** 610-208-8890 **Email:** [REDACTED]

Legal Entity

Name: DISCOVERY READING LEASING LLC
Address: 27599 RIVERVIEW CENTER BLVD, SUITE 201, BONITA SPRINGS, FL, 34134
Phone: 6102088890 **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I-1 **Date:** 11/17/2009 **Issued By:** PA L&I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 86 **Waking Staff:** 65

Inspection

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident **Exit Conference Date:** 10/09/2020

Inspection Dates and Department Representative

09/22/2020 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 104 **Residents Served:** 83

Secured Dementia Care Unit

| | | | |
|--------------------|--------------|------------------|--------------------------|
| In Home: No | Area: | Capacity: | Residents Served: |
|--------------------|--------------|------------------|--------------------------|

Hospice

Current Resident : 3

Number of Residents Who:

| | |
|--|--|
| Receive Supplemental Security Income: 0 | Are 60 Years of Age or Older: 83 |
| Diagnosed with Mental Illness: 0 | Diagnosed with Intellectual Disability: 1 |
| Have Mobility Need: 3 | Have Physical Disability: 0 |

Inspections / Reviews

09/22/2020 - Partial

Lead Inspector: [REDACTED]

Follow Up Type: *POC Submission*Follow-Up Date: *12/17/2020*

12/30/2020 POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *01/06/2021*

1/21/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

16c - Written Incident Report

1. Requirements

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

Resident #1 did not have access to their medications from 9/11/20 thru 9/15/20 which resulted in the resident being hospitalized due to complications of COPD on [REDACTED]. The home did not report this incident to the Department until the home received an allegation of caregiver neglect via Berks County Office on Aging.

Plan of Correction

Accept

This incident was not reported to DHS, as the resident did not move into the community with medication orders signed by a physician.

Executive Director will educate the nursing staff on incidents that are required to be reported to DHS.

Executive Director will monitor for compliance.

Completion Date: 01/08/2021

Update - 12/30/2020

Please send/ATTACH proof of staff training.

Document Submission

Implemented

Attached proof of staff training

187d - Follow Prescriber's Orders

1. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident # 1 was admitted to the facility on [REDACTED] thru [REDACTED] and did not receive [REDACTED] Combivent Inhaler, inhale 1 puff every 8 hours and Asmanex twist Inhaler, inhale 1 puff every 12 hours due to the resident's POA's refusal to pay for the cost of her medication. The resident eventually received [REDACTED] medications on 9/16/20 but was hospitalized due to shortness of breath.

187d - Follow Prescriber's Orders (continued)

Plan of Correction

Accept

Resident moved into the community [REDACTED] from rehab. Resident arrived from rehab with a signed DME. The DME did not include a list of medications, or an attached medication list. Rehab did forward a medication list to the community pharmacy, but it was not signed by a physician. Medication list provided to the pharmacy was profiled by pharmacy, but the pharmacy did not/would not send the medications due to not having medication orders signed by the physician. Nurse supervisor and community pharmacy tech contacted the physician via telephone and faxed the physician's office on 9/11/20, 9/12/20, 9/13/20, and 9/14/20.

On 9/15/20 the community pharmacy received medication orders signed by the resident's physician but the medication orders did not match the orders that were received by the rehab. The resident's physician included orders for two inhalers that the resident and the resident's son/poa stated the resident was not using. The resident's son/poa refused to pay for the medications and informed the pharmacy they were not to send to the community.

9/16/20 the community received signed medication orders discontinuing the inhalers the resident and the resident son/poa refused to pay for. The inhalers were ordered, received and administered to the the resident.

9/19/20 the resident was complaining of shortness of breath and pain in her chest. The resident was admitted to the hospital for exacerbation of COPD.

Executive Director and DHW assessed and modified the community move in process for receiving medication orders. Medication orders must be signed, received and reviewed prior to the resident moving into the community.

All staff assisting residents moving into the community will be educated on the modified move in process.

Executive will monitor for compliance

Completion Date: 12/08/2020

Update - 12/30/2020

Please send/Attach proof of the community's modified move in process.

Document Submission

Implemented

Attached modified move in process