

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

November 3, 2023

[REDACTED]  
EVERGREEN ELDER CARE INC  
1201 MUSEUM ROAD  
READING,, PA, 19611

RE: THE VILLA ST. ELIZABETH  
1201 MUSEUM ROAD  
READING, PA, 19611  
LICENSE/COC#: 20576

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/04/2023 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,

[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information		
Name: <i>THE VILLA ST. ELIZABETH</i>	License #: 20576	License Expiration: 11/18/2023
Address: 1201 MUSEUM ROAD, READING, PA 19611		
County: <i>BERKS</i>	Region: <i>NORTHEAST</i>	

Administrator		
Name: [REDACTED]	Phone: [REDACTED]	Email: [REDACTED]

Legal Entity		
Name: <i>EVERGREEN ELDER CARE INC</i>		
Address: 1201 MUSEUM ROAD, READING,, PA, 19611		
Phone: [REDACTED]	Email: [REDACTED]	

Certificate(s) of Occupancy		
Type: <i>C-1</i>	Date: <i>04/20/1992</i>	Issued By: <i>L&amp;I</i>

Staffing Hours		
Resident Support Staff: <i>0</i>	Total Daily Staff: <i>48</i>	Waking Staff: <i>36</i>

Inspection Information		
Type: <i>Partial</i>	Notice: <i>Unannounced</i>	BHA Docket #:
Reason: <i>Complaint</i>	Exit Conference Date: <i>10/04/2023</i>	

Inspection Dates and Department Representative	
10/04/2023 - On-Site:	[REDACTED]

Resident Demographic Data as of Inspection Dates			
General Information			
License Capacity: 92		Residents Served: 48	
Secured Dementia Care Unit			
In Home: <i>No</i>	Area:	Capacity:	Residents Served:
Hospice			
Current Residents: <i>0</i>			
Number of Residents Who:			
Receive Supplemental Security Income: <i>4</i>		Are 60 Years of Age or Older: <i>47</i>	
Diagnosed with Mental Illness: <i>29</i>		Diagnosed with Intellectual Disability: <i>3</i>	
Have Mobility Need: <i>0</i>		Have Physical Disability: <i>0</i>	

Inspections / Reviews		
10/04/2023 - Partial		
Lead Inspector: [REDACTED]	Follow-Up Type: <i>POC Submission</i>	Follow-Up Date: <i>10/20/2023</i>
11/03/2023 - POC Submission		
Submitted By: [REDACTED]	Date Submitted: <i>10/20/2023</i>	
Reviewer: [REDACTED]	Follow-Up Type: <i>Bypass Document Submission</i>	

Inspections / Reviews *(continued)*

11/03/2023 - Bypass Document Submission

Submitted By: [REDACTED]	Date Submitted: 11/03/2023
Reviewer: [REDACTED]	Follow-Up Type: <i>Not Required</i>

227d - Support Plan Medical/Dental

1. 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

Resident #1's support plan dated [REDACTED]/23 was not updated to reflect the following behaviors of the resident and the home's current plan to address the behaviors:  
 the need for and agreement between the home and the POA/resident to monitor resident's packages due to hoarding and excessive ordering behaviors as well as the need to coordinate care with multiple physicians to ensure resident does not attempt to obtain other medication orders. Resident #1 has a history of [REDACTED].

Plan of Correction

Accept [REDACTED] - 11/02/2023)

2600.227(d) – Support Plan Medical / Dental

- 1. Requirements
- 2600.
- 227.d.

Description of Violation

Resident #1's support plan dated [REDACTED]/23 was not updated to reflect the following behaviors of the resident and the home's current plan to address the behaviors: the need for and agreement between the home and the POA/resident to monitor resident's packages due to hoarding and excessive ordering behaviors as well as the need to coordinate care with multiple physicians to ensure resident does not attempt to obtain other medication orders. Resident #1 has a history of [REDACTED].

**The management of the facility respectfully submits that absolutely NO VIOLATION occurred relative to this 2600.227(d) regulation. For twenty-three years, the Villa St. Elizabeth has more than complied with the regulation 2600.227(d). Listed below is the exact wording of this regulation from the DHS – Bureau of Human Services Licensing – Regulatory Compliance Guide (RCG):**

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 costs of these medical and behavioral care services.

Discussion: See § 2600.227(a). Personal care homes must document and provide, or arrange for, personal care services to meet the needs of residents as indicated by the residents’ current medical evaluations and assessments. This includes “mental health and other behavioral care services” necessary to meet resident needs. For homes providing secured dementia care, or those serving people with dementia and related conditions in open care settings, this requirement includes the provision of specialized cognitive support services as indicated in the individual’s assessment and support plan. (Q/A October 2014-2600.227(d))

## 227d - Support Plan Medical/Dental (continued)

The RASP does not need to be updated each time there is a change in dosage for a new or existing medication. Any changes in dosage for a new or existing medication should be reflected on the resident's Medication Administration Record (MAR). (Q/A August 2015-2600.227(d))

Inspection Procedures: Inspectors will review resident records, as well as interview the administrator, staff, and/or residents of the home to determine if the home is in compliance with the regulation.

Primary Benefit: Ensures that each resident's needs are met as those needs change, and that accountability for meeting those needs is firmly established. Additional portions of meals and beverages at mealtimes shall be available for the resident.

The Villa ownership and management underscore the fact that **NO VIOLATION** of this regulation has ever occurred. The inspectors' **Description of Violation** above states that the resident's support plan was not updated to reflect the following concerns: the need for and agreement between the home and the POA/resident to monitor resident's packages due to hoarding and excessive ordering behaviors.... as well as the need to coordinate care with multiple physicians to ensure resident does not attempt to obtain other medication orders. Resident #1 has a history of [REDACTED]."

The above alleged violation IS CATEGORICALLY FALSE. Listed below and attached to this VR reply are the written communications that were included with the support plan specifically addressing the inordinate behaviors of Resident 1. It is requested that you carefully read these documents, and you will discover the extensive synergy among all disciplines that has been created by the Villa Administrators. The family (POA), many medical providers, the Office of the Aging, the Administrators of the Villa, Pharmerica Vice President's office and Resident 1 [REDACTED] were all proactive entities, who contributed to an all-inclusive corrective action plan. These documented efforts and measures reflect the true intent of the resident support plan.

1. 09-28-2022 Email from Villa Administrator to all parties.
2. 09-30-2022 Email from Villa Administrator to Resident 1 and [REDACTED] POA.
3. 10-02-2022 Email from Villa Administrator to all parties with signed and executed agreement. Please note – the opening sentence – THANK ALL OF YOU FOR YOUR COMBINED EFFORTS TO HELP [REDACTED] .....
4. 09-10-2023 Email from Villa Administrator to all parties including the resident, [REDACTED] POA and PCP detailing [REDACTED] behavior of ordering over 10,000 pills of nutrients, laxatives, etc.
5. 09-11-2023 Email from Villa Administrator to all parties with an inventory of [REDACTED] hoarded items.
6. 09-20-2023 DME – CANNOT SELF-ADMINISTER MEDICATIONS
7. 09-20-2023 [REDACTED], CRNP – Appointment notes – Assessment and Plan, including :

**"Polypharmacy.**

**- pt ordered numerous supplement OTC, staff found bottles in pt room, in addition pt is already on quite a bit of medications. Discussed at length with the patient, staff/[REDACTED]. On the needs to streamline pt medications and only administer prescribed medications. We have both come into an agreement that pt medications will be administered by staff, [REDACTED] will not have medications to self administer in the room. I will discontinue [REDACTED] erythromycin eyedrops its not needed at this time and colace which pt sates [REDACTED] does not uses. I will add benefiber daily prn per pt request as this usually work for [REDACTED] with the miralax."**

**Adhering to Page 28 of the DPW Licensing Reference Manual (9-1-2013 edition) Can settings dispute a finding on the LIS?, which states: "Settings may document disagreement with a finding, and/or may document that providing a plan does not constitute admission that the listed violation is accurate.**

**227d - Support Plan Medical/Dental (continued)**

**However, settings must provide a plan to correct each violation in addition to any statement(s) disputing the report's findings", the facility is complying by presenting the following plan which details its long-standing policy.** The facility has disputed the findings noted on 2600.161.c by the DHS inspectors. Nonetheless, in the spirit of compliance with the LRM, the required plan is submitted below:

**Plan of Correction**

1. REGULATION 2600.227.D. IS VERY IMPORTANT BECAUSE IT ENSURES AN ACCURATE ASSESSMENT OF A RESIDENT'S ABILITY AND ACCOMMODATION IS RECORDED AT ALL TIMES
2. A VIOLATION MAY OCCUR WHEN THE SUPPORT PLAN OR CORRESPONDING UPDATES DO NOT IDENTIFY A RESIDENT'S CURRENT PERFORMANCE OR CARE SERVICES
3. THE CAUSE OF THE VIOLATION WAS NOT INCLUDING A MORE SIGNIFICANT NOTATION ON THE UPDATES PAGE IN REFERENCE TO THE EXTENSIVE EFFORTS AND RESOURCES THE COMMUNITY HAS EXHAUSTED TO ACCOMMODATE THE UNBECOMING CONDUCT OF THE RESIDENT TO MAINTAIN COMPLIANCE AND SAFE WELL-BEING. THE ATTACHMENTS WERE MERELY FILED TOGETHER INSTEAD OF DIRECTLY REFERENCED ON THE RESPECTIVE PAGES
4. TO FIX THE VIOLATION RIGHT AWAY, THE ADMINISTRATOR EDITED THE UPDATE OF THE MOST RECENT EVENT TO INCLUDE NOTICE OF THE ATTACHED CORRESPONDENCE WHILE INSPECTORS WERE STILL ON SITE 10/04/2023
5. TO ENSURE ON-GOING COMPLIANCE TO REG 2600.227.D. THE VILLA WILL UTILIZE ITS TABULA PRO RECORD SOFTWARE DIRECT ATTACHMENT FEATURE TO NOTE AND ATTACH DOCUMENTATION FOR ALL RASP PARTIAL UPDATES OR CHANGES IN SUPPORT OR CARE ACCOMMODATIONS FOR ITS RESIDENTS
6. THE ADMINISTRATOR, WELLNESS DIRECTOR, AND RESIDENT CARE MANAGER WILL BE DIRECTLY RESPONSIBLE FOR THE ON-GOING COMPLIANCE TO THE PROPER UPDATES TO SUPPORT PLANS
7. NOTE: THE EXTENSIVE COORDINATION OF PROVIDERS AND COMMUNITY ACCOMMODATION ABOVE AND BEYOND REGULATIONS UTILIZING THE PROPER COMMUNICATION CHANNELS AND SAFEGUARDS TO PROVIDE THE MOST OPTIMAL ENVIRONMENT WITH THE RESIDENTS OVERALL HEALTH AS PARAMOUNT.

PLEASE SEE ATTACHED.

Licensee's Proposed Overall Completion Date: 10/20/2023

Implemented [REDACTED] - 11/03/2023)