

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

October 17, 2024

[REDACTED]
EC OPCO READING LLC
[REDACTED]

ECLIPSE SR LIV ATTN LICENSING
[REDACTED]

RE: CELEBRATION VILLA OF EXETER
9 COLIN COURT
READING, PA, 19606
LICENSE/COC#: 22716

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/20/2024 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: CELEBRATION VILLA OF EXETER License #: 22716 License Expiration: 07/11/2025
 Address: 9 COLIN COURT, READING, PA 19606
 County: BERKS Region: NORTHEAST

Administrator

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

Legal Entity

Name: EC OPCO READING LLC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 96 Waking Staff: 72

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Incident Exit Conference Date: 08/20/2024

Inspection Dates and Department Representative

08/20/2024 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 70 Residents Served: 59

Secured Dementia Care Unit
 In Home: Yes Area: Memory Care Capacity: 25 Residents Served: 21

Hospice
 Current Residents: 4

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 59
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 37 Have Physical Disability: 3

Inspections / Reviews

08/20/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 09/21/2024

10/03/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: 10/11/2024
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 10/07/2024

Inspections / Reviews *(continued)*

10/17/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/11/2024

Reviewer [REDACTED]

Follow-Up Type: *Not Required*

141a 1-10 Medical Evaluation Information

1. Requirements

2600.

141.a. A resident shall have a medical evaluation by a physician, physician’s assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:

1. A general physical examination by a physician, physician’s assistant or nurse practitioner.
2. Medical diagnosis including physical or mental disabilities of the resident, if any.
3. Medical information pertinent to diagnosis and treatment in case of an emergency.
4. Special health or dietary needs of the resident.
5. Allergies.
6. Immunization history.
7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
8. Body positioning and movement stimulation for residents, if appropriate.
9. Health status.
10. Mobility assessment, updated annually or at the Department’s request.

Description of Violation

Resident [REDACTED] Document of Medical Evaluation (DME) dated [REDACTED] does not include an indication of mobility need, the section is blank.

Plan of Correction

Accept [REDACTED] - 10/03/2024)

Actions: Immediately on [REDACTED], Resident [REDACTED] mobility was updated via checkmark on the DME by the CRNP, who was present in the community during the time of this finding.

On [REDACTED], an audit was completed by the Executive Director, Director of Nursing, and Memory Care Coordinator to ensure completion of all DME’s.

Training: On [REDACTED] the Executive Director educated Director of Nursing, Memory Care Coordinator, and Sales Director on Regulation 2600.141a and on expectations for completion of all sections on a DME.

Ongoing: Effective [REDACTED], the Director of Nursing and Memory Care Coordinator will ensure completion of all DME’s for residents in Personal Care and Secure Dementia Care Unit. The Executive Director will ensure all DME’s are complete via audit and findings will be reviewed with the leadership team monthly during the Quality Assurance meeting for 3 months.

Licensee’s Proposed Overall Completion Date: 11/20/2024

Implemented [REDACTED] - 10/17/2024)

187d - Follow Prescriber's Orders

2. Requirements

2600.

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

Description of Violation

Resident [REDACTED] has an order for [REDACTED], [REDACTED] three times daily with meals and also a sliding scale order for [REDACTED], three times daily with meals. On [REDACTED] the resident’s blood sugar was not tested in the morning and the home did not administer [REDACTED] of [REDACTED] as ordered by the prescriber. Resident [REDACTED] [REDACTED] was not tested on [REDACTED] until 11:08am.

187d - Follow Prescriber's Orders (continued)

Plan of Correction

Accept [REDACTED] **10/03/2024)**

This was a self-reported incident submitted to DHS on [REDACTED] which resulted in this violation.

Action: On [REDACTED], the Medication Technician was counseled for the medication error and was provided additional training by the Certified Medication Administration Trainer to prevent an error from occurring again.

Training: On [REDACTED], the Medication Technician was educated on Regulation 2600.187d and observed for proper procedures of medication administration by the Director of Nursing. On [REDACTED], the Memory Care Coordinator and Executive Director met with Medication Technician for follow-up medication administration review and in-depth root cause to ensure compliance.

Ongoing: On [REDACTED], the Director of Nursing and Memory Care Coordinator held a Medication Technician meeting to ensure that medication administration procedures are followed and root cause for any concerns with compliance were rectified. The Director of Nursing, Memory Care Coordinator, and Executive Director will continue to observe medication administration procedures during rounds, but officially at a minimum of every 6 months by the Director of Nursing who is a Certified Medication Administration Trainer to maintain compliance with the Medication Administration Program.

Licensee's Proposed Overall Completion Date: 09/20/2024

Implemented [REDACTED] **10/17/2024)**