

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

May 7, 2025

[REDACTED]
1263 S CEDAR CREST BLVD SENIOR LIVING I OPCO LLC
[REDACTED]

RE: RITTENHOUSE VILLAGE AT LEHIGH
VALLEY
1263 S CEDAR CREST BOULEVARD
ALLENTOWN, PA, 18103
LICENSE/COC#: 22301

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/19/2025 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: RITTENHOUSE VILLAGE AT LEHIGH VALLEY **License #:** 22301 **License Expiration:** 08/23/2025
Address: 1263 S CEDAR CREST BOULEVARD, ALLENTOWN, PA 18103
County: LEHIGH **Region:** NORTHEAST

Administrator

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

Legal Entity

Name: 1263 S CEDAR CREST BLVD SENIOR LIVING I OPCO LLC
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 122 **Waking Staff:** 92

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident **Exit Conference Date:** 03/20/2025

Inspection Dates and Department Representative

03/19/2025 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 110 **Residents Served:** 84

Secured Dementia Care Unit

In Home: Yes **Area:** n/a **Capacity:** 34 **Residents Served:** 23

Hospice

Current Residents: 8

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 84
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 38 **Have Physical Disability:** 2

Inspections / Reviews

03/19/2025 Partial

Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 04/19/2025

04/30/2025 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 04/30/2025
Reviewer: [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 05/02/2025

Inspections / Reviews *(continued)*

05/07/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/30/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

107b - Emergency Procedures

1. Requirements

2600.

107.b. The home shall have written emergency procedures that include the following:

- 5. Duties and responsibilities of staff persons during evacuation, transportation and at the emergency location. These duties and responsibilities shall be specific to each resident's emergency needs.

Description of Violation

On [REDACTED] a fire was noted in the laundry basket of the homes laundry room, the staff person put water on the fire, contacted the nurse and the front desk who called 911. The staff used walkie talkies to evacuate everyone to an internal fire safe area, until the fire department responded and gave the all clear. A review of the home's emergency procedures indicated that when a fire is noted staff are to remove person's from the immediate danger then activate the fire alarms and call 911. The staff did not activate the fire alarms as per the home's policy.

Plan of Correction

Accept [REDACTED] - 04/30/2025)

- 1. Staff in-serviced by Executive Director on 3/20/25, 3/19/25, 3/18/25, 3/17/25 on fire drill procedures and laundering of cleaning rags.
- 2. It is now the policy of the home to not dry cleaning rags in a dryer. They are to be air dried.
- 3. Executive Director to monitor monthly fire drills for compliance and proper laundering of cleaning rags.

Licensee's Proposed Overall Completion Date: 04/16/2025

Implemented [REDACTED] - 05/07/2025)