

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

March 3, 2025

[REDACTED]
THE COMMUNITY AT ROCKHILL
[REDACTED]
[REDACTED]

RE: THE COMMUNITY AT ROCKHILL
3250 STATE ROAD
SELLERSVILLE, PA, 18960
LICENSE/COC#: 12687

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/28/2025 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: *THE COMMUNITY AT ROCKHILL* License #: *12687* License Expiration: *04/02/2025*
 Address: *3250 STATE ROAD, SELLERSVILLE, PA 18960*
 County: *BUCKS* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *THE COMMUNITY AT ROCKHILL*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-2* Date: *03/01/2012* Issued By: *West Rockhill Township*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *43* Waking Staff: *32*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Monitoring* Exit Conference Date: *01/28/2025*

Inspection Dates and Department Representative

01/28/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *74* Residents Served: *43*
 Secured Dementia Care Unit
 In Home: *No* Area: Capacity: Residents Served:
 Hospice
 Current Residents: *0*
 Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *43*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

01/28/2025 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *02/17/2025*

02/25/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *02/17/2025*
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *03/02/2025*

Inspections / Reviews *(continued)*

03/03/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/28/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

183e - Storing Medications

1. Requirements

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

Description of Violation

Resident [REDACTED] is prescribed [REDACTED] - instill 1 drop in both eyes for dry/itchy eyes. The drops were opened on [REDACTED]. Manufacturer's instructions indicate that these drops should be discarded 90 days after opening. The drops were still available in the medication cart on [REDACTED] at 1:30pm.

On [REDACTED] the following medication cards were observed to have a punctured blister foil with the medication still present in the spot- exposing it to contamination or improper sanitation:

- Resident [REDACTED] blister pack
- Resident [REDACTED] blister pack

Plan of Correction

Directed [REDACTED] 02/20/2025)

See attached.

Pharmacy provided "Medications with shortened expiration dates" list. This document has been placed in each binder of each medication cart. All staff notified.

A meeting has been scheduled with [REDACTED], from Wellness Pharmacy. We will be meeting with [REDACTED] to review current medication carts. We will brainstorm of ways to prevent tears and holes of the medication cards. Some of the considerations are getting an additional med cart for only PRN meds to allow more room in the carts. We will discuss the possibility of changing the medication packaging from blister cards to the medication rolls. We are open to any and all suggestions from the pharmacy review to implement changes to prevent the violations.

Compliance will be ongoing and reviewed during monthly medication cart audits performed by Clinical Care Coordinator and Designated Nursing Staff.

Directed Plan of Correction [REDACTED] 2/20/2025):

-In addition to the steps submitted for the plan of correction the Clinical Care Coordinator will provide a training to all clinical staff and med techs on the importance of dating medications and the careful opening of medications, by 2/28/25.

Proposed Overall Completion Date: 02/24/2025

Directed Completion Date: 02/24/2025

Implemented [REDACTED] - 03/03/2025)