



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

Sent via email to: [REDACTED]

**MAILING DATE: October 7, 2014**

Mr. Joseph Negrao, VP  
Alexandria Manor of Allentown Inc.  
7 South New Street  
Nazareth, Pennsylvania 18064

RE: Alexandria Manor II  
313 South Walnut Street  
Bath, Pennsylvania 18014  
License: #205260

Dear Mr. Negrao:

As a result of the Department of Public Welfare's licensing inspection on September 10, 2014 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

*Michele Moskalczyk*  
Michele Moskalczyk  
Regional Licensing Administrator

Enclosure  
Licensing Inspection Summary

**VIOLATION REPORT  
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600**

<b>PCH Name:</b> ALEXANDRIA MANOR II		<b>License Number:</b> 20526
<b>Address:</b> 313 S WALNUT ST, BATH, PA 18014		<b>County:</b> Northampton
<b>Administrator:</b> Clarissa DeGross		<b>Region:</b> NORTHEAST
<b>Legal Entity Name:</b> ALEXANDRIA MANOR OF ALLENTOWN INC		
<b>Legal Entity Address:</b> 7 SOUTH NEW STREET, NAZARETH, PA 18064		
<b>Certificate(s) of Occupancy</b> C-3 SP 08/27/1998 Dept. of Labor and Industry		
<b>Staffing Hours</b> Resident Support: 0    Total Daily Staff: 80    Waking Staff: 60		
<b>Type of Inspection:</b> Partial		<b>BHA Docket Number:</b>
<b>Notice:</b> Unannounced		
<b>Reason(s) for Inspection(s)</b> Incident		
<b>On-Site Inspections Dates and Department Representatives On-Site</b> 09/10/2014: Rushin, Julienne		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b> 09/16/2014: Rushin, Julienne		
<b>Other Details</b> Partial or Full Triggers:    Random Indicators:		
<b>Resident Demographic Data as of Inspection Dates</b>		
Licensed Capacity: 78  Number of Residents Served: 57  Secured Dementia Care Unit in Home: No  Area:  Secured Dementia Unit Capacity, if Applicable:  Number of Residents Served in Secured Dementia Care Unit, if applicable:  Number of Current Hospice Residents: 3  Number of Hospice Residents in past year: 35	<b>Number of Residents who:</b>  Receive Supplemental Security Income: 0  Are 60 Years of Age or Older: 54  Have Mental Illness: 8  Have an Intellectual Disability: 2  Have a Mobility Need: 23  Have a Physical Disability: 3	

Violation Report: 20526 - 09/10/2014 - Rushin, Julienne

PCH Name: ALEXANDRIA MANOR II

1. REGULATION 55 Pa.Code §2600

2600.185(a) - The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

2a. DESCRIPTION OF VIOLATION

On 9/4/14, staff discovered that Morphine and Ativan were missing from all 4 comfort packs that were stored in an unlocked refrigerator in the locked medication room that multiple staff persons have access to. The home's medication storage policy does not outline the steps that will be taken to ensure the safe storage and accountability of, as well as the limited access to narcotics contained in hospice comfort packs.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Upon discovering comfort packs were compromised - DPW & police were called. Hospice was called & made aware; new comfort kits were ordered. Locks were immediately placed on the fridge & the door leading to the fridge room. Police took a report (still have not received report even after requesting). Interviews were done with all med techs - one had been fired for tardiness before meds were discovered missing. All comfort packs are opened now & checked immediately when they come in - inventory checked & narcotic sheets written up. med techs open & check them during regular narcotic count. They are kept in a locked fridge, in locked room, in locked med room. Only "main" med tech on duty have keys for fridge, med room & narcotic drawers. Meds from comfort packs are only dispensed when Hospice RN or DR tells us to as has always been our policy. Administrator will be responsible for ongoing compliance in accordance with reg 185a

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page)

*Clarissa DeGroot*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page)

Clarissa DeGroot LPN/adm

Date 10/6/14

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 10/6/14 (Date)

Plan of correction implementation status as of 10/6/14 (Date)

The above plan of correction was approved by *m* (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented