



pennsylvania
DEPARTMENT OF PUBLIC WELFARE

NOV 13 2014

Ms. Michelle Hamilton, Chief of Senior Living Operations
Country Meadows of Northampton Associates LP
830 Cherry Drive
Hershey, Pennsylvania 17033

RE: Country Meadows of Bethlehem III
4007 Green Pond Road
Bethlehem, Pennsylvania 18020
License #: 232880

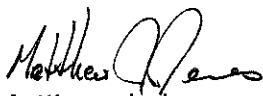
Dear Ms. Hamilton:

As a result of the Department of Public Welfare's licensing inspection on October 1, 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.

Your regular license for the period December 8, 2014 to December 8, 2015 was issued on August 22, 2014. Your regular license remains in good standing.

Sincerely,


Matthew J. Jones
Director */s/*

Enclosure
License Inspection Summary

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

PCH Name: COUNTRY MEADOWS OF BETHLEHEM III		License Number: 232880
Address: 4007 GREEN POND ROAD, BETHLEHEM, PA 18020		County: Northampton
Administrator: Una Walsh		Region: NORTHEAST
Legal Entity Name: COUNTRY MEADOWS OF NORTHAMPTON ASSOCIATES LP		
Legal Entity Address: 830 CHERRY DRIVE, HERSHEY, PA 17033		
Certificate(s) of Occupancy		
C-2 LP 03/25/1992 L&I	Other 05/06/1992 Bethlehem Township	
Staffing Hours		
Resident Support: 0	Total Daily Staff: 71	Waking Staff: 53
Type of Inspection: Ind - Full	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Renewal		
On-Site Inspections Dates and Department Representatives On-Site		
10/01/2014: Novak, Ryan; Hummel, Jesse		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers: 132d & 144c		Random Indicators: 5b, 85b, 98b-1, 41a, 251a
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 100 Number of Residents Served: 70 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: 2 Number of Hospice Residents in past year: 14	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 70 Have Mental Illness: 0 Have an Intellectual Disability: 0 Have a Mobility Need: 1 Have a Physical Disability: 0	

Violation Report: 23288 - 10/01/2014 - Novak, Ryan
 PCH Name: COUNTRY MEADOWS OF BETHLEHEM III

1. REGULATION 65 Pa.Code §2600
 2600.109(b) - Cats and dogs present at the home shall have a current rabies vaccination. A current certificate of rabies vaccination from a licensed veterinarian shall be kept.

2a. DESCRIPTION OF VIOLATION
 Jazz the standard poodle and Peanut the manchester terrier reside in the home. Their rabies vaccination expired on 6/22/14.

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.

It is the policy of Country Meadows that all cats and dogs present at the home shall have a current rabies vaccination. Jazz the standard poodle was given a rabies vaccine on 10/1/2014; and Peanut the Manchester terrier was given a rabies vaccine on 10/1/2014 (see attached.) All vaccination dates for pets will be monitored by the campus Pet Coordinator and reviewed by the Executive Director for ongoing compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
Signature of Legal Entity Representative (Required on EVERY Page)			
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Michelle Hamilton Chief of Senior Living Operations			Date October 31, 2014

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

The above plan of correction is approved as of <u>11.5.14</u> (Date)	Plan of correction implementation status as of <u>11.5.14</u> (Date)
The above plan of correction was approved by <u>M</u> (Initials)	<input checked="" type="checkbox"/> Fully Implemented <input type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

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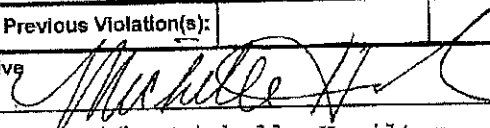
1. REGULATION 56 Pa.Code §2600
 2600.132(d) - Residents shall be able to evacuate the entire building to a public thoroughfare, or to a fire-safe area designated in writing within the past year by a fire safety expert within the period of time specified in writing within the past year by a fire safety expert.

2a. DESCRIPTION OF VIOLATION
 The facilities letter from the fire safety expert dated 12/4/13 designates 13 minutes as a safe evacuation time. On 2/20/14 at 5:50am the facility evacuated the residents in 13 minutes and 24 seconds.


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.

Any fire drill that is not completed within the evacuation time that has been designated by the fire safety expert will be run again. Any concerns will be addressed and corrected in order to meet the required time frame. Staff was in-serviced on 10/2/2014 on fire safety procedures. A successful fire drill was completed on 2/27/2014 @ 5:45 a.m. in 5 minutes and 56 seconds. (See attached)

Ongoing compliance will be monitored by the Executive Director.

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Michelle Hamilton Chief of Senior Living Operations		October 31, 2014

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Violation Report: 23288 - 10/01/2014 - Novak, Ryan
 PCH Name: COUNTRY MEADOWS OF BETHLEHEM III

1. REGULATION 55 Pa.Code §2600
 2600.144(c) - A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures that include 2600.144(c)1-3.

2a. DESCRIPTION OF VIOLATION
 3 extinguished cigarette butts were located on the grass outside the side service entrance. 4 extinguished cigarette butts were located next to the dumpster. The home is completely non smoking on campus.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
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All cigarette butts and matches were immediately cleaned up in the outside of the building. An in-service for staff was completed on 10/2/2014 to review the smoking policy and importance of fire safety. All new co-workers and residents will be educated on Country Meadows's smoking policy upon moving in or during Orientation. Ongoing, the Maintenance Director and Executive Director will continually monitor outside grounds for any signs of smoking.

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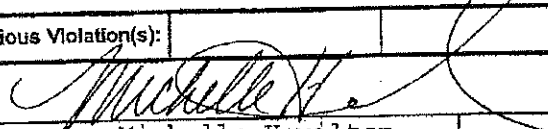
Violation Report: 23288 - 10/01/2014 - Novak, Ryan
 PCH Name: COUNTRY MEADOWS OF BETHLEHEM III

1. REGULATION 55 Pa.Code §2600
 2600.183(d) - Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home

2a. DESCRIPTION OF VIOLATION
 Resident #1's Lantus insulin was opened on 9/1/14. The medication was still in use, the insulin expires 28 days after opening the vial.

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.

Resident # 1's Lantus insulin was immediately destroyed. Nurses and Medication Associates attended an in-service on 10/3/2014 presented by the Assistant Director of Wellness to review the policy and procedure of "Expiration of Medication." The in-service included education on Medication Dates and the Stability of Common Insulin Brands. The Assistant Director of Wellness will monitor for ongoing compliance.

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