



# pennsylvania

DEPARTMENT OF HUMAN SERVICES

MAR 10 2017

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 Human Services' annual licensing inspection on September 22, 2016 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.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to [https://www.surveymonkey.com/r/BHSL\\_Inspection](https://www.surveymonkey.com/r/BHSL_Inspection).

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink that reads "Rowe".

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary



Violation Report: 23288 - 09/22/2016 - Dumas, Gerald  
 PCH Name: COUNTRY MEADOWS OF BETHLEHEM III

**1. REGULATION 55 Pa.Code §2600**

2600.183(f) - Prescription medications, OTC medications and CAM that are discontinued, expired or for residents who are no longer served at the home shall be destroyed in a safe manner according to the Department of Environmental Protection and Federal and State regulations. When a resident permanently leaves the home, the resident's medications shall be given to the resident, the designated person, if any, or the person or entity taking responsibility for the new placement on the day of departure from the home.

**2a. DESCRIPTION OF VIOLATION**

Medications belonging to resident # 1 ( who was discharged from the home on [REDACTED] 16 ), were found in the medication cart. These medications include : Loperamide Imodium take 1 cap daily and Acetaminophen 325 mg take 2 tabs ( 650mg) 3 x daily .

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

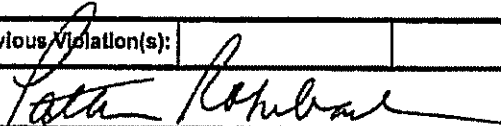
*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

Medications belonging to resident #1, Loperamide imodium take 1 cap daily and Acetaminophen 325 mg take 2 tabs (650 mg) 3x daily, were immediately destroyed in a safe manner. All appropriate staff were re-educated on the process of ensuring that upon discharge medication is given to the appropriate person, returned to the pharmacy or destroyed in a safe manner. Nurse will monitor discharges daily. The Campus Director of Wellness will audit discharges biweekly. The Administrator will monitor 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 Patti Rohrbach  
 (Required on EVERY Page) Vice President of Operations

Date November 10, 2016


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

The above plan of correction is approved as of 12-6-16  
 (Date)

Plan of correction implementation status as of 12-6-16  
 (Date)

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

The above plan of correction was approved by



(Initials)

Violation Report: 23288 - 09/22/2016 - Dumas, Gerald  
 PCH Name: COUNTRY MEADOWS OF BETHLEHEM III

**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**  
 The home's policies does not indicate that all prescribed medications need to be available at all times.

Resident # 2 is prescribed Triamcinolon apply thin layer to affected area 2x as needed for rash was not available for administration.

Resident # 3 is prescribed Amlodipine tab 2.5 take 1 tab orally every 4 hrs as needed was not available for administration.

**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.

On 9/22/16, Resident #2's Triamcinolon was ordered, and Resident #3's Amlodipine was ordered. An audit of all medications was completed on 9/22/16 to ensure all ordered medications are available. All appropriate staff were retrained by the Assistant Director of Wellness (ADOW) on the policies and procedures pertaining to Medication Storage, Distribution and Medication Order Management. All appropriate staff were instructed on the importance of the responsibility of managing the resident medications. At the end of each shift the shift leader will review resident orders to ensure the timely re-ordering of medications. The ADOW will complete monthly audits of the re-ordering process. The Administrator will monitor 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      Patti Rohrbach  
 (Required on EVERY Page)      Vice President of Operations      Date November 10, 2016

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