



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

NOV 14 2018

Ms. Diana Ponterio  
Senior Vice President of Operations/Regulatory Compliance  
Country Meadows of Northampton Associates LP  
830 Cherry Drive  
Hershey, Pennsylvania 17033

RE: Country Meadows of Bethlehem V  
4025 Green Pond Road  
Bethlehem, Pennsylvania 18020  
License #: 200750

Dear Ms. Ponterio:

As a result of the Department's Bureau of Human Services Licensing annual inspection on September 11, 2018 and September 14, 2018 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, appearing to read 'J. Rowe'.

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary

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

<b>PCH Name:</b> COUNTRY MEADOWS OF BETHLEHEM V		<b>License Number:</b> 20075
<b>Address:</b> 4025 GREEN POND ROAD, BETHLEHEM, PA 18020		<b>County:</b> Northampton
<b>Administrator:</b> Melissa Clementoni		<b>Region:</b> NORTHEAST
<b>Legal Entity Name:</b> COUNTRY MEADOWS OF NORTHAMPTON ASSOCIATES LP		
<b>Legal Entity Address:</b> 830 CHERRY DRIVE, HERSHEY, PA 17033		
<b>Certificate(s) of Occupancy</b>		
I-2 03/25/2013 PA L&I	C-2 LP 03/07/2003 PA L&I	I-2 07/06/2010 PA L&I
<b>Staffing Hours</b>		
<b>Resident Support:</b> 0	<b>Total Daily Staff:</b> 87	<b>Waking Staff:</b> 65
<b>Type of Inspection:</b> Full	<b>BHA Docket Number:</b>	<b>Notice:</b> Unannounced
<b>Reason(s) for Inspection(s)</b>		
Renewal		
<b>On-Site Inspections Dates and Department Representatives On-Site</b>		
09/11/2018: OHaire, Anne; Deluca, Amy; Mendez, Vanessa		
09/14/2018: OHaire, Anne; Deluca, Amy; Mendez, Vanessa		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b>		
<b>Other Details</b>		
<b>Partial or Full Triggers:</b>		<b>Random Indicators:</b>
<b>Resident Demographic Data as of Inspection Dates</b>		
<b>Licensed Capacity:</b> 126 <b>Number of Residents Served:</b> 75 <b>Secured Dementia Care Unit in Home:</b> No <b>Area:</b> <b>Secured Dementia Unit Capacity, if Applicable:</b> <b>Number of Residents Served in Secured Dementia Care Unit, if applicable:</b> <b>Number of Current Hospice Residents:</b> 3 <b>Number of Hospice Residents in past year:</b> 12	<b>Number of Residents who:</b> <b>Receive Supplemental Security Income:</b> 0 <b>Are 60 Years of Age or Older:</b> 75 <b>Have Mental Illness:</b> 0 <b>Have an Intellectual Disability:</b> 0 <b>Have a Mobility Need:</b> 12 <b>Have a Physical Disability:</b> 0	

Violation Report: 20075 - 09/11/2018 - OHaire, Anne  
 PCH Name: COUNTRY MEADOWS OF BETHLEHEM V

**1. REGULATION 55 Pa.Code §2600**

2600.66(b) - The plan must include training aimed at improving the knowledge and skills of the home's direct care staff persons in carrying out their job responsibilities. The staff training plan must include the following:

- (1) The name, position and duties of each direct care staff person.
- (2) The required training courses for each staff person.
- (3) The dates, times and locations of the scheduled training for each staff person for the upcoming year.

**2a. DESCRIPTION OF VIOLATION**

The home's annual training plan, for training year 2018, does not include the the following training: Medication self-administration training which is required for all direct care staff.

**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.*

At the time of inspection, the document titled "Adult Residential Licensing- Personal Care Homes Staff Training Plan" was provided to the inspector. This document states there are "Monthly Continuing Ed Topics Including 7 Direct Care Training Topics". Country Meadows maintains an additional document entitled "Country Meadows ANNUAL Co-Worker Training Plan". On this additional document, the course for Medication- Self Administration is listed as a required annual training topic for all direct care co-workers. This document is reviewed with all co-workers prior to the start of each annual training year.

Copy of "Adult Residential Licensing-Personal Care Homes Staff Training Plan" and "Country Meadows ANNUAL Co-Worker Training Plan" attached.

Executive Director to monitor for ongoing compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) 

Printed Name and Title of Legal Entity Representative Diana Ponterio  
 (Required on EVERY Page) Sr. VP of Ops / Regulatory Compliance Date November 1, 2018

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

The above plan of correction is approved as of 11-6-18  
 (Date)

The above plan of correction was approved by MM  
 (Initials)

Plan of correction implementation status as of 11-6-18  
 (Date)

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

Violation Report: 20075 - 09/11/2018 - O'Haire, Anne  
 PCH Name: COUNTRY MEADOWS OF BETHLEHEM V

**1. REGULATION 65 Pa.Code §2600**

2600.131(f) - Fire extinguishers shall be inspected and approved annually by a fire safety expert. The date of the inspection shall be on the extinguisher.

**2a. DESCRIPTION OF VIOLATION**

The home's fire extinguishers in buildings #2, #3, #4, units 1 & 2 had an expiration date of August 20, 2018, which is beyond the allowable annual time frame.

**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.*

At time of inspection, fire extinguisher maintenance was previously scheduled for 9/14/2018. The delay for maintenance was due to Kistler O'Brien being behind in their annual inspection plan. All extinguishers were inspected on 9/14/2018.

Picture of updated fire extinguisher tag and letter from Kistler O'Brien attached.

Executive Director and Maintenance Director to monitor for ongoing compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative (Required on EVERY Page) 

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Diana Ponterio Sr. VP of Ops / Regulatory Compliance	Date November 1, 2018
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