



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: nfuricchia@gmail.com
Mailing Date: December 9, 2019

Mr. Nader Hamati
President & CEO
Above & Beyond at the Knights LLC
4293 Chatter Way
Allentown, Pennsylvania 18103

RE: Above & Beyond at the Knights
1545 Greenleaf Street
Allentown, Pennsylvania 18102
License #: 226470

Dear Mr. Hamati:

As a result of the Department's Bureau of Human Services Licensing inspection on March 28, 2019 of the above facility, the citations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa. Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Anne Graziano".

Anne Graziano
Human Services Licensing Supervisor

Enclosure
Violation Report

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

PCH Name: ABOVE & BEYOND AT THE KNIGHTS		License Number: 22647
Address: 1545 GREENLEAF STREET, ALLENTOWN, PA 18102		County: Lehigh
Administrator: Naila Hamati		Region: NORTHEAST
Legal Entity Name: ABOVE AND BEYOND AT THE KNIGHTS LLC		
Legal Entity Address: 4293 CHATTER WAY, ALLENTOWN, PA 18103		
Certificate(s) of Occupancy C-2 LP 04/12/18 L&I		
Staffing Hours		
Resident Support: 0	Total Daily Staff: 127	Waking Staff: 95
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s) Complaint		
On-Site Inspections Dates and Department Representatives On-Site 03/28/2019: Novak, Ryan		
Off-Site Inspection Dates and Inspectors, if Applicable		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 150 Number of Residents Served: 93 Secured Dementia Care Unit in Home: Yes Area: n/a Secured Dementia Unit Capacity, if Applicable: 32 Number of Residents Served in Secured Dementia Care Unit, if applicable: 27 Number of Current Hospice Residents: 10 Number of Hospice Residents in past year: 12	Number of Residents who: Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 92 Have Mental Illness: 6 Have an Intellectual Disability: 4 Have a Mobility Need: 34 Have a Physical Disability: 4	

Violation Report: 22647 - 03/28/2019 - Novak, Ryan
 PCH Name: ABOVE & BEYOND AT THE KNIGHTS

1. REGULATION 55 Pa.Code §2600

2600.227(d) - Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services.

2a. DESCRIPTION OF VIOLATION

Resident #1 is being repositioned because of wounds; the RASP dated 2/14/19 has not been updated to reflect the residents current care needs.


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, RASP had an addendum added specifically to address wound care positioning and care needs (see attached documents)

Wellness staff retrained to document positioning needs in RASP or add addendum for short term, non-recurring needs.

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) Naila Furicchia, ED

Date 8/26/2019

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

The above plan of correction is approved as of <u>10-4-19</u> (Date) The above plan of correction was approved by <u>ag</u> (Initials)	Plan of correction implementation status as of <u>10-4-19</u> (Date) <input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented
---	--