



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: sparker@countrymeadows.com
MAILING DATE: February 24, 2020

Ms. Diana Ponterio
Sr. VP of Ops/Regulatory Compliance
Country Meadows Associates II LP
830 Cherry Drive
Hershey, Pennsylvania 17033

RE: Country Meadows of Forks
175 Newlins Road West
Easton, Pennsylvania 18040
License #: 226550

Dear Ms. Ponterio:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on December 12, 2019 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

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

Anne Graziano
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: COUNTRY MEADOWS OF FORKS

License Number: 22655

Address: 175 NEWLINS ROAD WEST,, EASTON, PA 18040

County: NORTHAMPTON

Region: NORTHEAST

Administrator

Name: Susan Parker

Phone: 4845443880

Email: sparker@countrymeados.com

Legal Entity

Name: COUNTRY MEADOWS ASSOCIATES II LP

Address: 830 CHERRY DRIVE, HERSHEY, PA, 17033

Certificate(s) of Occupancy

Type: I-1

Date: 07/12/2016

Issued By: Folks Township

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 98

Waking Staff: 74

Inspection

Type: Full

BHA Docket #:

Notice: Unannounced

Reason: Renewal

Inspection Dates and Department Representative

12/12/2019 - On-Site: Gerald Dumas, Ryan Yankowy

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 90

Residents Served: 68

Special Care Unit

In Home: Yes

Area: Main floor

Capacity: 45

Residents Served: 30

Hospice

Current Residents: 2

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 68

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 30

Have Physical Disability: 1

18 Other laws, regs, ordins.

Requirements

2800.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

The Influenza poster is not posted in a public conspicuous area of the home as required by the Influenza Awareness Act.

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.)

While Country Meadows of Forks did have influenza posters throughout the facility, we should have posted the one from the DHS website instead of the CDC poster. This was immediately corrected the same day as the survey. Going forward the Executive Director and designees will only display the poster from the DHS website. Ongoing the Executive Director and DON will monitor for compliance.

Legal Entity Representative

Diana Portero
Signature

Diana Portero Sr VP
Printed Name and Title

1/21/2020
Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 1-30-2020
(Date)

Plan of correction implementation status as of 1-30-2020
(Date)

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

Implemented
 Not Implemented

132d Evacuation

Requirements

2800.

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. For purposes of this subsection, the fire safety expert may not be a staff person of the residence.

Description of Violation

The homes designated safe evacuation time as designated by the fire safety expert based on the construction of the home is 15 minutes. The following fire drills exceeded the maximum time for evacuation: The fire drill conducted on 8/12/19 at 5:15am took 17 minutes and 24 seconds and the fire drill conducted on 2/16/19 at 12:17am took 15 minutes and 6 seconds for evacuation.

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.)

We have modified our fire drill procedure and retrained the staff which will allow us to complete the drill within the total evacuation time. The Executive Director and Director of Maintenance will review the evacuation times after each fire drill to ensure ongoing compliance.

Legal Entity Representative

Diana Ponterio
Signature

Diana Ponterio Sr VP
Printed Name and Title

1/21/2020
Date

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227c Final support plan - revision

Requirements

2800.

227.c. The final support plan shall be revised within 30 days upon completion of the annual assessment or upon changes in the resident's needs as indicated on the current assessment. The residence shall review each resident's final support plan on a quarterly basis and modify as necessary to meet the resident's needs.

Description of Violation

Resident #1's most recent ASP was completed on 6/27/19. The quarterly review of the ASP was completed on 10/21/19.

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.)

There was an error in transcription and the wrong month was entered for the quarterly review for one resident and therefore the review was late. The director of wellness conducted audits to ensure all residents' quarterly reviews are completed within the correct time frames as set forth in the regulation. The Executive Director/Director of Nursing/designees will conduct random audits of residents' support plans to ensure ongoing compliance.

Legal Entity Representative

Diana Pontero

Signature

Diana Pontero Sr VP

Printed Name and Title

1/21/2020

Date

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