



**Sent via e-mail to: [amelick@countrymeadows.com](mailto:amelick@countrymeadows.com)**  
**MAILING DATE: June 10, 2020**

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

RE: Country Meadows of Allentown  
Building 2  
420 North Krocks Road  
Allentown, Pennsylvania 18106  
License #: 226940

Dear Ms. Ponterio:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on March 16, 2020 and March 30, 2020 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, appearing to read "M. Moskalczyk".

Michele Moskalczyk  
Human Services Licensing Supervisor

Enclosure  
Licensing Inspection Summary

# Violation Report

## Facility Information

Name: COUNTRY MEADOWS OF ALLENTOWN

License Number: 22694

Address: 420 NORTH KROCKS ROAD, BUILDING 2, ALLENTOWN, PA 18106

County: LEHIGH

Region: NORTHEAST

## Administrator

Name: Anne Melick

Phone: 6103956521

Email: AMelick@COUNTRYMEADOWS.COM

## Legal Entity

Name: COUNTRY MEADOWS OF ALLENTOWN LLC

Address: 830 CHERRY DRIVE, HERSHEY, PA, 17033

## Certificate(s) of Occupancy

Type: C-2 LP

Date:

Issued By:

## Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 98

Waking Staff: 74

## Inspection

Type: Partial

BHA Docket #:

Notice: Unannounced

Reason: Incident

## Inspection Dates and Department Representative

03/16/2020 - Off-Site: Pamela Harris

03/30/2020 - Off-Site: Pamela Harris

## Resident Demographic Data as of Inspection Dates

### General Information

License Capacity: 100

Residents Served: 67

### Secured Dementia Care Unit

In Home: Yes

Area: 0

Capacity: 60

Residents Served: 37

### Hospice

Current Residents: 7

### Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 67

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 37

Have Physical Disability: 0

234a - Admission Support Plan

Regulations

2600.

234.a. Within 72 hours of the admission, or within 72 hours prior to the resident's admission to the secured dementia care unit, a support plan shall be developed, implemented and documented in the resident record.

Description of Violation

Resident 1 was admitted to the Secure Dementia Care Unit (SDCU) on 12/31/19. The resident didn't have an Resident Assessment Support Plan created with in 72 hours of her admission date to the SDCU.

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.)

**The 72 hour RASP for this resident was overlooked and was not completed until 1/13/2020. A new spreadsheet system has been put in place to track the completion dates to prevent this from reoccurring. The Director of Nursing and Assistant Director of Nursing will monitor the spreadsheet weekly to ensure compliance of the dates for RASP completion.**

Legal Entity Representative

*Diana Pontero*  
Signature

DIANA PONTERIO  
Printed Name and Title

SR VICE PRES.  
5/6/2020  
Date

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

The above plan of correction is approved as of 5-18-2020  
(Date)

Plan of correction implementation status as of 5-18-2020  
(Date)

Implemented

Not Implemented

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