

Department of Human Services
Bureau of Human Service Licensing

March 31, 2021

██████████ EXECUTIVE DIRECTOR
SOUTH MOUNTAIN MEMORY CARE LLC
201 SOUTH SEVENTH STREET
EMMAUS, PA 18049

RE: SOUTH MOUNTAIN MEMORY CARE
201 SOUTH SEVENTH STREET
EMMAUS, PA, 18049
LICENSE/COC#: 22721

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/14/2020, 10/15/2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Anne Graziano

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY**

Facility Information

Name: SOUTH MOUNTAIN MEMORY CARE **Licen e #:** 22721 **Licen e Expiration Date:** 09/17/2021
Addr e : 201 SOUTH SEVENTH STREET, EMMAUS, PA 18049
County: LEHIGH **Region:** NORTHEAST

Administrator

Name: [REDACTED] **Phone:** 6109657662 **Email:** [REDACTED]

Legal Entity

Name: SOUTH MOUNTAIN MEMORY CARE LLC
Address: 201 SOUTH SEVENTH STREET, EMMAUS, PA, 18049
Phone: 6109657662 **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I-1 **Date:** 02/14/2018 **Issued By:** Emmaus Boro

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 40 **Waking Staff:** 30

Inspection

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Rea on: Incident **Exit Conference Date:** 10/15/2020

Inspection Dates and Department Representative

10/14/2020 - Off-Site: [REDACTED]
10/15/2020 Off Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 28 **Residents Served:** 20

Secured Dementia Care Unit

In Home: Yes **Area:** NA **Capacity:** 28 **Re ident Served:** 20

Hospice

Current Residents: 3

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 20
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 20 **Have Physical Disability:** 2

Inspections / Reviews

10/14/2020 - Partial

Lead Inspector: [REDACTED]

Follow Up Type: *POC Submission*Follow-Up Date: *11/02/2020*

11/3/2020 POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *11/17/2020*

11/16/2020 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *12/02/2020*

3/31/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

121a - Unobstructed Egress

1. Requirements

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

The door that leads into the laundry room is locked by a key operating lock, the laundry room has an emergency exit leading out of the facility. This door must be locked with a magnetic lock and unobstructed.

Plan of Correction

Do Not Accept

2600 121a. – Unobstructed Egress

Regulations: Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

The door that leads to into the laundry room is locked by a key operating lock the laundry room has an emergency exit leading out of the facility. This door must be locked with a magnetic lock and unobstructed.

Plan of Correction:

Effective 11/2/2020, Emergency Exit sign will be removed from above laundry room door. As described in the South Mountain Memory Care evacuation plan "Exhibit A" residents and staff will exit the building by the North rear exit zone A), Main front exit (zone B) or South front exit (zone C) in the event an evacuation must take place. "Exhibit B" also shows the evacuation routes for all 3 fire safe zones at South Mountain Memory Care. The laundry room is not designated as an emergency exit route on the fire evacuation plan. The removal of this emergency exit sign will not alter the emergency evacuation route/plan at South Mountain Memory Care. The laundry room door will continue to function as a key locked door and provide a means of egress to staff who are in possession of a key, if needed. In zone B, the appropriate means of egress should be the Main Front exit, which is equipped with a magnetic locking system. The laundry door and front main exit door are approx. 40 feet apart making this exit a reasonable and suitable evacuation route for zone B.

Completion Date: 11/17/2020

Update - 11/03/2020

The home may not continue to use a key locking device. Please see 121b and 233d. An acceptable POC must be submitted.

AG, 11-3-2020

121a - Unobstructed Egress (continued)

Plan of Correction

Directed

2600 121a. – Unobstructed Egress

Regulations: Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

The door that leads to into the laundry room is locked by a key operating lock the laundry room has an emergency exit leading out of the facility. This door must be locked with a magnetic lock and unobstructed.

Plan of Correction:

***In lieu of previously submitted plan of correction that was not accepted, SMMC has not removed the Emergency exit sign above the door and has scheduled Eastern Time (installer of our Magnetic lock system) and GC Electric (our electric contractor) to install a Magnetic Locking system to this laundry room interior door as requested above. The necessary parts and materials have been ordered and both contractors are checking their schedules for an install date. This should be completed within 2 weeks or less of today's date 11/16/2020. Upon completion of the magnetic ock being installed, this ED will certify that the installation has taken place and the door is operating on a magnetic ocking mechanism to further satisfy Regulations 121b and 233d.

Directed Plan of Correction:

Upon completion of the installation of the new locking system and removal of key locking doors, the home will send digital photos to the Northeastern Regional Office as verification of compliance. AG, 11-16-2020.

Completion Date: 12/02/2020

Document Submission

Implemented

On 12/9/2020 a magnetic locking system was installed at South Mountain Memory Care. Please see attached photo of completed lock. Additionally, a letter from the installer is provided certifying the equipment installation and it's function in the rest of our secure locking system. As of 12/9/2020 the plan of correction has been implemented and completed.

141a 1-10 Medical Evaluation Information

1. Requirements

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:

- 1 A general physical examination by a physician, physician's assistant or nurse practitioner.
- 2 Medical diagnosis including physical or mental disabilities of the resident, if any.
- 3 Medical information pertinent to diagnosis and treatment in case of an emergency.
- 4 Special health or dietary needs of the resident.
- 5 Allergies.
- 6 Immunization history.
- 7 Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
- 8 Body positioning and movement stimulation for residents, if appropriate.
- 9 Health status.
- 10 Mobility assessment, updated annually or at the Department's request.

Description of Violation

Resident #1's medical evaluation dated 9/14/20 did not include pulse rate, health status or cognitive functioning.

141a 1-10 Medical Evaluation Information (continued)

Plan of Correction**Directed***2600 141.a Medical evaluation**Regulations: A resident is evaluated in person by a physician, physician's assistant, or certified registered nurse practitioner within the specified timeframe. The evaluation includes checking everything required by § 2600.141(a) (2).**Description of Violation**Resident #1: DME form was not completed by resident's PCP in time frame as directed by the RCG. Pulse, medical & cognitive status.**Plan of Correction: Moving forward: the staff at South Mountain Memory Care which include, Marketer, DOW, 3 11 LPN will review every section of a potential completed DME from an outside hospital or PCP. The staff doing the audit will use a red pen to check areas. If it is deemed that the DME is incomplete the Marketer or DOW will contact the source to make corrections.*

- 1. Marketer and DOW will ensure that instructions are included with every DME form prior to admission*
- 2. Marketer, DOW, 3 11 LPN will audit every potential completed DME from outside source*
- 3. Marketer, DOW, 3 11 LPN will use a red pen to check all areas of the DME*
- 4. If deemed, that the DME is incomplete the Marketer, DOW will contact the source to make the corrections.*
- 5. Admission cannot take place until the DME is correctly completed.*

*Directed Plan of Correction**11 3 2020**The home will correct the record in question by working in concert with the resident's physician to currently complete the DME in question.**The home will audit existing records to ensure current compliance. A record of the audit will be retained by the home.**The corrected record will be sent via the portal for review.**AG, 11 3 2020***Completion Date** *11/16/2020***Document Submission****Implemented***Corrected record attached and audited for completeness.*