

Department of Human Services
Bureau of Human Service Licensing

June 4, 2021

██████████ EXECUTIVE DIRECTOR
HEATHER GLEN SENIOR LIVING LLC
5930 HAMILTON BOULEVARD
WESCOSVILLE, PA 18106

RE: HEATHER GLEN SENIOR LIVING
415 BLUE BARN ROAD
ALLENTOWN, PA, 18104
LICENSE/COC#: 22682

Dear ██████████

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/04/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Michele Moskalczyk
Human Services Licensing Supervisor

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: HEATHER GLEN SENIOR LIVING **License #:** 22682 **License Expiration Date:** 01/29/2022
Address: 415 BLUE BARN ROAD, ALLENTOWN, PA 18104
County: LEHIGH **Region:** NORTHEAST

Administrator

Name: [REDACTED] **Phone:** 6108414478 **Email:** [REDACTED]

Legal Entity

Name: HEATHER GLEN SENIOR LIVING LLC
Address: 5930 HAMILTON BOULEVARD, WESCOSVILLE, PA, 18106
Phone: 6108414478 **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I-1 **Date:** 04/06/2017 **Issued By:** Upper Macungie Township

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 109 **Waking Staff:** 82

Inspection

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Incident **Exit Conference Date:** 03/04/2021

Inspection Dates and Department Representative

03/04/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 120 **Residents Served:** 69

Secured Dementia Care Unit

In Home: Yes **Area:** 0 **Capacity:** 48 **Residents Served:** 40

Hospice

Current Resident: 4

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: 40 **Have Physical Disability:** 0

Inspections / Reviews

03/04/2021 - Partial

Lead Inspector: [REDACTED]

Follow Up Type: *POC Submission*Follow-Up Date: *04/29/2021*

4/25/2021 POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *04/30/2021*

6/4/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

234d - Support Plan Revision

1. Requirements

2600.

234.d. The support plan shall be revised at least annually and as the resident's condition changes.

Description of Violation

A support plan for resident #1 was completed on 2/3/21; The support plan states that resident #1 has no problems with aggression. On 2-13-21, staff reported that they attempted to redirect resident #1, without success and ■ began throwing and smashing dishes, cups, and saucers on the kitchen floor. It was further reported that staff tried to get an understanding of why ■ was upset, and ■ said ■ was going to kill ■ and other residents. The resident was sent to the ER for evaluation. The RASP was not updated after this event, nor was a plan in place to monitor possible behaviors.

Plan of Correction**Accept**

Resident #1 lives in the Memory Care Unit. Resident #1 did not show aggressive behavior at time of admission. Resident #1 has been a resident with Heather Glen since early ■ Resident #1 showed aggressive behavior for the first time on 2/13/21. Resident was sent out to hospital for mental Status change evaluation. Resident return from hospital with no significant changes, no changes to medication. Resident was still adjusting to ■ new surroundings. Staff was also adjusting to resident's needs as well. At time of inspection Resident's care plan stated no aggressive behavior.

Care plan was immediately updated after the inspection to show that resident may have aggressive behavior and how staff is to redirect resident.

Executive Director and Director of Wellness have created a tickler file to ensure all residents care plans are up to date. Executive Director and Director of Wellness will periodically review tickler file to ensure all care plans are updated with any significant changes.

Completion Date: 04/21/2021

Update - 04/25/2021

Please send/Attach proof of staff training.

Document Submission**Implemented**

Updating Care Plans for Residents

A Care Plan needs to be updated for the following reasons:

- When resident returns from the Hospital with a significant change. Example being hip/knee replacement, Hospice services started, etc
- When a resident is exhibiting new behaviors in the Secure Dementia Unit.

We currently have the Director of Wellness, Director of Memory Care, Lead Med-tech, and Executive Director currently doing the Care Plans for the residents at Heather Glen Senior Living.

Executive Director and Director of Wellness will periodically do a chart audit to ensure all Care Plans are completed and updated.

Please see attach retraining sign in sheet for the meeting held with the above mentioned staff on April 30, 2021.