

Department of Human Services
Bureau of Human Service Licensing

February 24, 2022

[REDACTED]
MERAKEY PENNSYLVANIA
[REDACTED]

RE: MERAKEY PENNSYLVANIA
515 DELAWARE AVENUE
BETHLEHEM, PA, 18015
LICENSE/COC#: 22401

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/07/2021 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: *MERAKEY PENNSYLVANIA* License #: *22401* License Expiration: *06/11/2022*
Address: *515 DELAWARE AVENUE, BETHLEHEM, PA 18015*
County: *LEHIGH* Region: *NORTHEAST*

Administrator

Name: [REDACTED] Phone: *6108668331* Email: [REDACTED]

Legal Entity

Name: *MERAKEY PENNSYLVANIA*
Address: *4251 CRUMS MILL ROAD, HARRISBURG, PA, 17112*
Phone: *6108668331* Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *15* Waking Staff: *11*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Incident* Exit Conference Date: *10/07/2021*

Inspection Dates and Department Representative

10/07/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *16* Residents Served: *15*

Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *15* Are 60 Years of Age or Older: *6*
Diagnosed with Mental Illness: *15* Diagnosed with Intellectual Disability: *2*
Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

10/07/2021 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *01/24/2022*

Inspections / Reviews *(continued)*

02/08/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: *02/15/2022*

02/24/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

227d - Support Plan Medical/Dental

1. Requirements

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. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

Resident #1's daily progress note that the resident can be oppositional, argue, and will superficially self-injure when the resident does not get their way. The resident has a history of being aggressive to staff and residents. The RASP dated [redacted] notes the resident does not have any problems with irritability, judgement, agitation, and aggression. The RASP has not been updated to reflect the residents current care needs.

Plan of Correction

Accept

227d - Support Plan Medical/Dental

1. Requirements

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. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation:

Resident #1's daily progress note that the resident can be oppositional, argue, and will superficially self-injure when the resident does not get their way. The resident has a history of being aggressive to staff and residents. The RASP dated 6/15/21 notes the resident does not have any problems with irritability, judgement, agitation, and aggression. The RASP has not been updated to reflect the residents current care needs.

Plan of Correction:

- 1. Addendum sheet created to reflect behaviors of resident from day of admission on [redacted]
- 2. RASP for resident #1 updated to reflect irritability, judgment, agitation, and aggression on [redacted]
- 3. Direct Care Staff and/or Nurse will notify Administrator/ Asst. Administrator of any changes in a resident whenever the Administrator/ Assistant Administrator are not on shift when an issue is noted. Staff will be made aware that a resident's RASP needs to be updated to reflect a change in their status that was not previous known and/or was noted as part of their history and resurfacing due to a trigger or an event. All staff will be trained on this process by 1/25/2022 and will sign off on process.
- 4. Administrator will review all progress notes from the previous day as well as on the Monday following a weekend and will update a resident's RASP utilizing the addendum sheet to reflect any changes that occurred with that resident and what plan has been set in place for the resident.

Completion Date: 1/25/2022

Update: 02/08/2022

Please send in the completed RASP addendum for Resident # 1 with Step 2 of the POC process.

AG, 2-8-22

Document Submission

Implemented

Updated RASP Addendum