

Department of Human Services
Bureau of Human Service Licensing

February 8, 2022

[REDACTED]
COUNTRY MEADOWS OF ALLENTOWN LLC

RE: COUNTRY MEADOWS OF
ALLENTOWN
430 NORTH KROCKS ROAD
ALLENTOWN, PA, 18106
LICENSE/COC#: 22693

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/09/2021 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: *COUNTRY MEADOWS OF ALLENTOWN* License #: 22693 License Expiration: 08/31/2022
Address: 430 NORTH KROCKS ROAD, ALLENTOWN, PA 18106
County: *LEHIGH* Region: *NORTHEAST*

Administrator

Name: [REDACTED] Phone: 6103956521 Email: [REDACTED]

Legal Entity

Name: *COUNTRY MEADOWS OF ALLENTOWN LLC*
Address: 830 CHERRY DRIVE, HERSHEY, PA, 17033
Phone: 6103956521 Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 106 Waking Staff: 80

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Incident* Exit Conference Date: 12/21/2021

Inspection Dates and Department Representative

12/09/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 118 Residents Served: 70

Secured Dementia Care Unit

In Home: *Yes* Area: *n/a* Capacity: 60 Residents Served: 36

Hospice

Current Residents: 4

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 70
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 36 Have Physical Disability: 2

Inspections / Reviews

12/21/2021 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: 01/03/2022

Inspections / Reviews *(continued)*

01/10/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*

Follow-Up Date: *01/18/2022*

01/17/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *01/24/2022*

02/08/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [redacted] Resident #1 pushed Resident #2. Resident #2 fell and sustained a broken femur as a result of Resident #1's aggressive behavior.

Plan of Correction

Do Not Accept

Country Meadows takes all allegations and instances of abuse very seriously, At the time of the incident, Resident# 1 was immediately separated from Resident# 2. Resident# 2 was assessed by a nurse and sent to the hospital for further evaluation. Resident# 1 was placed immediately on frequent checks and their PCP was notified. Resident# 1 had a 1 :1 aide with them beginning [redacted] through 11 /19/21 and again for the first 72 hours after Resident# 2 returned to the facility on [redacted] Resident# 1 was seen by their PCP on 11/8/2021 which resulted in a medication change. Connections Program Manager and Executive Director will monitor for ongoing compliance.

Update: 01/10/2022

To complete the 2 Step Plan of Correction Process, (POC), upon Resubmission of the POC, the Home needs to include the possibility of progressive steps of intervention up to and including a 30 days notice and discharge or implementation of Regulation 2600.228h in the event a resident can no longer be managed in the home due to dangerous or aggressive behaviors. This needs to be included on the POC please.

Documentation should be sent in the Portal.
AG, 1-10-22

Plan of Correction

Accept

Country Meadows takes all allegations and instances of abuse very seriously, At the time of the incident, Resident# 1 was immediately separated from Resident# 2. Resident# 2 was assessed by a nurse and sent to the hospital for further evaluation. Resident# 1 was placed immediately on frequent checks and their PCP was notified. Resident# 1 had a 1 :1 aide with them beginning [redacted] through 11 /19/21 and again for the first 72 hours after Resident# 2 returned to the facility on [redacted]. Resident# 1 was seen by their PCP on 11/8/2021 which resulted in a medication change. The facility will continue to monitor Resident #1 for any signs of behaviors related to their diagnosis of dementia and will notify the POA and PCP of any behaviors. If at any point, Resident #1 can no longer be managed in the home due to dangerous or aggressive behaviors, the home would issue a 30 day notice. Connections Program Manager and Executive Director will monitor for ongoing compliance.

Update: 01/17/2022

To complete the 2 Step Plan of Correction Process, (POC), upon Resubmission of the POC, submit any training signature sheets, copy of handouts used in the training, and and relevant resident RASP updates for Resident # 1.

Documentation should be sent in the Portal.
AG, 1-17-22

Document Submission

Implemented

Documentation attached.

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

Nursing notes and staff interviews indicate that Resident #1 is very easily agitated when other people come near the resident's room and also with seating arrangements at tables. The resident has been verbally aggressive to staff and residents. Resident #1's RASP dated [REDACTED] has not been updated to reflect the residents current behaviors and how the home will manage them.

Plan of Correction

Accept

Resident# 1 's RASP was updated on [REDACTED] to reflect the residents current behaviors and how the home will manage them. Resident RASPS will be updated with an addendum or significant change RASP if there is a change to a residents care needs. Connections Program Manager and Executive Director to monitor for ongoing compliance.

Update: 01/10/2022

To complete the 2 Step Plan of Correction Process, (POC), upon Resubmission of the POC, please include a copy of the RASP addendum or update.

Documentation should be sent in the Portal.

AG, 1-10-22

Document Submission

Implemented

Documentation attached.