

Department of Human Services  
Bureau of Human Service Licensing

March 1, 2022

[REDACTED], VP/COO  
[REDACTED]  
[REDACTED]  
[REDACTED]

RE: SALISBURY BEHAVIORAL HEALTH  
513 LEHIGH STREET  
ALLENTOWN, PA, 18103  
LICENSE/COC#: 21674

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/11/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

[REDACTED]  
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: SALISBURY BEHAVIORAL HEALTH License #: 21674 License Expiration: 03/26/2022  
Address: 513 LEHIGH STREET, ALLENTOWN, PA 18103  
County: LEHIGH Region: NORTHEAST

Administrator

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

Legal Entity

[REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 07/12/1999 Issued By: PA L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 19 Waking Staff: 14

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:  
Reason: Renewal Exit Conference Date: 01/11/2022

Inspection Dates and Department Representative

01/11/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 20 Residents Served: 19

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 19 Are 60 Years of Age or Older: 17  
Diagnosed with Mental Illness: 19 Diagnosed with Intellectual Disability: 1  
Have Mobility Need: 0 Have Physical Disability: 1

Inspections / Reviews

01/11/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 02/10/2022

Inspections / Reviews (*continued*)

02/03/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *02/09/2022*

02/06/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *02/14/2022*

03/01/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

103f - Refrigerator/Freezer Temps

1. Requirements

2600.

103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

Description of Violation

The refrigerator located in the medication room had a temperature reading of 47°F on the date of inspection.

Plan of Correction

Do Not Accept

Salisbury Behavioral Health understands the importance of regulation 2600.103 (f). Immediately and on-going a shift task sheet has been created for staff to be prompted on the 7 AM to 3 PM and 3 PM to 11 PM shifts to check and record the refrigerator/freezer temperatures and report to a supervisor if the readings are above the required temperatures.

Update: 02/03/2022

Please include in plan of correction, who is responsible for fixing the problem and monitoring compliance, what action that person will take, and when that action will happen. 02-03-2022 MM

Plan of Correction

Accept

Salisbury Behavioral Health understands the importance of regulation 2600.103(f). Immediately and on-going a shift task sheet has been created by the Administrator and Assistant Administrator for staff to check and document the refrigerator/freezer temperatures and in the event the temperatures are above the required temperature the sheet instructs the staff to notify the supervisor.

Update: 02/06/2022

The administrator shall monitor weekly X's 3 months and be responsible for ongoing compliance. 2-6-2022 MM

Document Submission

Implemented

Immediately and on-going the administrator and assistant administrator shall conduct weekly audits of all refrigerator/freezer temperature sheets to ensure compliance of regulation 2600.103(f). In addition a new refrigerator has been purchased along with a back refrigerator to be utilized in the event the temperature reading is not within regulation.

144c2 - Smoking Area Distance

1. Requirements

2600.

144.c. A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures that include the following:

- 2. A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures that include the following: Location of a smoking room or outside smoking area a safe distance from heat sources, hot water heaters, combustible or flammable materials and away from common walkways and exits.

Description of Violation

The home had evidence of cigarette smoking at the rear entrance leading into the facility. The stairs had a heavy accumulation of cigarette butts along the base of the stairs and residents were observed smoking outside of the designated smoking area.

Plan of Correction

Do Not Accept

Salisbury Behavioral Health understands the importance of regulation 2600.144(c)(2). Immediately and on-going

**144c2 - Smoking Area Distance (continued)**

*a task sheet has been created for all shifts that will prompt staff during each shift to check and clean the designated smoking areas twice throughout the shift.*

**Update:** 02/03/2022

*Please include in plan of correction, who is responsible for fixing the problem and monitoring compliance, what action that person will take, and when that action will happen. 02-03-2022 MM*

**Plan of Correction****Accept**

*Salisbury Behavioral Health understands the importance of regulation 2600144(c)(2). Immediately and on-going a shift task sheet has been created by the Administrator and Assistant Administrator to prompt staff on each shift to clean the designated smoking areas twice per shift as well as to check the area for any cigarette butts on the ground.*

**Update:** 02/06/2022

*The administrator shall monitor weekly X's 3 months and be responsible for ongoing compliance. 2-6-2022 MM*

**Document Submission****Implemented**

*Immediately and on-going the administrator and assistant administrator shall monitor the daily staff task sheets daily to ensure all staff are complying with the cleaning of the smoking areas.*