

Department of Human Services
Bureau of Human Service Licensing

May 2, 2022

[REDACTED]
ALEXANDRIA MANOR OF ALLENTOWN INC
7 SOUTH NEW STREET
NAZARETH, PA, 18064

RE: ALEXANDRIA MANOR
7 SOUTH NEW STREET
NAZARETH, PA, 18064
LICENSE/COC#: 21064

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/08/2022 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: *ALEXANDRIA MANOR* License #: *21064* License Expiration: *08/15/2022*
Address: *7 SOUTH NEW STREET, NAZARETH, PA 18064*
County: *NORTHAMPTON* Region: *NORTHEAST*

Administrator

Name: [REDACTED] Phone: *6107594060* Email: [REDACTED]

Legal Entity

Name: *ALEXANDRIA MANOR OF ALLENTOWN INC*
Address: *7 SOUTH NEW STREET, NAZARETH, PA, 18064*
Phone: *6107594060* Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *05/17/1994* Issued By: *L&I*

Staffing Hours

Resident Support Staff: Total Daily Staff: *81* Waking Staff: *61*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Incident* Exit Conference Date: *02/08/2022*

Inspection Dates and Department Representative

02/08/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *93* Residents Served: *59*

Secured Dementia Care Unit

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

Hospice

Current Residents: *13*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *57*
Diagnosed with Mental Illness: *2* Diagnosed with Intellectual Disability: *1*
Have Mobility Need: *22* Have Physical Disability: *0*

Inspections / Reviews

02/08/2022 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*

Follow-Up Date: *04/09/2022*

04/19/2022 - POC Submission

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *04/26/2022*

05/02/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

201 - Positive Interventions

1. Requirements

2600.

201. Safe Management Techniques - The home shall use positive interventions to modify or eliminate a behavior that endangers the resident himself or others. Positive interventions include improving communications, reinforcing appropriate behavior, redirection, conflict resolution, violence prevention, praise, deescalation techniques and alternative techniques or methods to identify and defuse potential emergency situations.

Description of Violation

On 1/29/22, Resident #1 inappropriately touched Resident #2. Resident #1's assessment and support plan stated that Resident #1 speaks sexually inappropriate and aggressively towards staff and residents. The home has not implemented a plan to modify or eliminate the behaviors of this resident.

Plan of Correction

Accept

Resident #1 was immediately removed from the incident and permanently removed from contact with Resident #2. Resident #1 will be monitored by staff consistently when in group settings and not left unattended at any given time. Resident # 1 was ordered Psych services for inappropriate and aggressive sexual behaviors with a treatment plan of 2-4 visits per month after [redacted] follow-up with PCP, Dr. Miriam Shustik, on 2/2/2022. All staff have received a re-education in Dementia Care Services on 3/14/2022 & 4/15/2022. A Sexual Behaviors in the Elderly in-service is scheduled for 4/21/2022 & 4/25/2022. All information above has been implemented and documented in Resident #1 current support plan.

Completion Date: 04/25/2022

Update: 04/19/2022

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. 04-19-2022 MM

Please attach proof of staff training. 4-19-2022 MM

Document Submission

Implemented

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. 04-19-2022 MM

Administrator/Designee is responsible for fixing the problem and monitoring compliance. 4/26/2022 HS

Please attach proof of staff training. 4-19-2022 MM

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 current assessment and support plan, dated [redacted], indicates that Resident #1 has a moderate problem with judgement and that resident #1 will speak sexually inappropriately and become sexually aggressive to others. On 1/29/22, Resident #1 touched resident #2 inappropriately in the dining room. Through interviewing of staff, it was indicated that Resident #1 cannot be in a group setting without staff supervision due to sexual behaviors. The assessment and support plan was not updated to indicate how the home was going to handle residents sexually aggressive behavior.

227d - Support Plan Medical/Dental (continued)

Plan of Correction

Accept

Resident #1's current support plan dated [REDACTED] states a moderate problem with sexual judgement and aggression with a plan to meet service need. Resident # 1 support plan has since been updated to include the plan of care for the incident happening on 1/29/2022, follow-up with PCP, and new order for the introduction of psych services with an initial diagnostic interview and a progress note. DCS will continue to monitor Resident #1 in group settings and redirect as needed. Administrator/Designee will update residents support plan with additional pertinent information to maintain compliance with DHS regulations. All staff received re-education in "Dementia Care" on 3/14 & 4/15/2022 and will receive education in a "Sexual Behaviors in the Elderly" in-service on 4/21 & 4/25/2022.

Completion Date: 04/25/2022

Update: 04/19/2022

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. 04-19-2022 MM

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Please attach proof of staff training. 4-19-2022 MM

Department of Human Services
Bureau of Human Service Licensing
PRIVACY CODING

Facility Information

Name: ALEXANDRIA MANOR

License #: 21064

License Expiration: 08/15/2022

Address: 7 SOUTH NEW STREET, NAZARETH, PA 18064

Inspection Information

Start Date: 02/08/2022

Type: Partial

Staff Privacy Coding

Designation

Staff Members Name

Job Title

Date Hired

Resident Privacy Coding

Designation

Resident's Name

Resident 1

Caroline Struss

Resident 2

Mary Lou Hann