

Department of Human Services
Bureau of Human Service Licensing

November 7, 2022

[REDACTED]
SOUTH MOUNTAIN MEMORY CARE LLC
201 SOUTH SEVENTH STREET
EMMAUS, PA, 18049

RE: SOUTH MOUNTAIN MEMORY CARE
201 SOUTH SEVENTH STREET
EMMAUS, PA, 18049
LICENSE/COC#: 22721

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/08/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY - PUBLIC

Facility Information

Name: SOUTH MOUNTAIN MEMORY CARE License #: 22721 License Expiration: 09/17/2022
Address: 201 SOUTH SEVENTH STREET, EMMAUS, PA 18049
County: LEHIGH Region: NORTHEAST

Administrator

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

Legal Entity

Name: SOUTH MOUNTAIN MEMORY CARE LLC
Address: 201 SOUTH SEVENTH STREET, EMMAUS, PA, 18049
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 21 Total Daily Staff: 63 Waking Staff: 47

Inspection Information

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

Inspection Dates and Department Representative

08/08/2022 Off Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 28 Residents Served: 21

Secured Dementia Care Unit

In Home: Yes Area: n/a Capacity: 28 Residents Served: 21

Hospice

Current Residents: 1

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 21
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 21 Have Physical Disability: 0

Inspections / Reviews

08/08/2022 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 09/06/2022

10/06/2022 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/13/2022

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 10/13/2022

11/07/2022 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/13/2022

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]/22 at approximately [REDACTED] am an allegation of sexual assault was made regarding staff member A and Resident #1. Staff member A was indefinitely suspended pending the findings of the police investigation. On [REDACTED]/22 evidence was found that staff member A sexually assaulted Resident #1 on [REDACTED]/22.

POC Submission

Accept ([REDACTED] - 10/06/2022)

On [REDACTED]/2022 ED and DOW were made aware of a claim of alleged sexual assault by Staff Member A on Resident 1. ED immediately suspended Staff Member A pending the results of the investigation and began putting into motion SMMC's mandatory abuse reporting policy and procedure. On [REDACTED]/2022 SMMC's internal investigation into Staff Member A's employment revealed falsification of employee's timesheet, a terminable offense and Staff Member A's employment was terminated effective [REDACTED]/2022. Termination letter attached, Exhibit B. SMMC staff and Executive Director notified all applicable local and state agencies as noted on Exhibit A, attached, in the appropriate time frame. ED also placed direct call to [REDACTED] to discuss appropriate next steps and direction for compliance. SMMC fully cooperated with all initial and ongoing investigations being completed by AAA, DHS and Emmaus Police Department in conjunction with District Attorney's office. After all agencies initial investigations, all agencies noted that there was no physical evidence to support the claim and the preliminary findings were that investigations would be temporarily closed pending the results the sexual assault kit collected on [REDACTED]/2022 at [REDACTED] Hospital [REDACTED]. Exhibit C details the timeline of events that took place following the alleged incident.

SMMC reviewed our internal abuse reporting, hiring and investigation policies and procedures and has determined that we have been compliant in each area. SMMC has not identified any area that could be improved in regards to these policies and notes no wrong doing that led to the incident. SMMC was made aware on 7/28/2022, with a phone call from [REDACTED] from Emmaus PD, that the results of Resident's 1's specimen kit revealed [REDACTED] and an arrest was being made.

SMMC has retrained all current staff on Resident Rights. This topic has been included in our New Hire Orientation and training since our opening in 2018. SMMC believes that the policies and procedures we have in place are effective and sufficient to remain compliant with DHS regulations and our standard of care. Staff Member A had a clear criminal background check, active CNA license, and years of experience at other Skilled and Personal Care communities as well as agency staffing experience. All SMMC staff determined there were no red flags or prior indications that Staff Member A was capable of this type of conduct.

SMMC will continue to follow our policies and procedures for hiring, investigation and abuse reporting as [REDACTED] has stated everything that could have been done was done appropriately since being notified of the incident to ensure the continued health and safety of our residents.

Licensee's Plan Completion Date: 09/01/2022

Implemented [REDACTED] - 11/07/2022)