

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

January 6, 2023

[REDACTED], ADMINISTRATOR
ALEXANDRIA MANOR OF ALLENTOWN, INC.
[REDACTED]

RE: ALEXANDRIA MANOR OF
ALLENTOWN - BETHLEHEM
CAMPUS
3534 LINDEN STREET
BETHLEHEM, PA, 18017
LICENSE/COC#: 21456

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/17/2022, 08/22/2022, 09/21/2022, 09/26/2022, 09/27/2022, 10/07/2022 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

Facility Information

Name: ALEXANDRIA MANOR OF ALLENTOWN - BETHLEHEM CAMPUS **License #:** 21456 **License Expiration:** 09/29/2023

Address: 3534 LINDEN STREET, BETHLEHEM, PA 18017

County: NORTHAMPTON

Region: NORTHEAST

Administrator

Name: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Legal Entity

Name: ALEXANDRIA MANOR OF ALLENTOWN, INC.

Address: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff:

Total Daily Staff: 38

Waking Staff: 29

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Complaint

Exit Conference Date: 10/07/2022

Inspection Dates and Department Representative

08/17/2022 On Site: [REDACTED]

08/22/2022 On Site: [REDACTED]

09/21/2022 Off Site: [REDACTED]

09/26/2022 Off Site: [REDACTED]

09/27/2022 Off Site: [REDACTED]

10/07/2022 Off Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 58

Residents Served: 35

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 3

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 35

Diagnosed with Mental Illness: 3

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 3

Have Physical Disability: 1

Inspections / Reviews

08/17/2022 Partial

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *10/29/2022*

11/28/2022 - POC Submission

Submitted By: [REDACTED]

Date Submitted: *12/02/2022*

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: *12/05/2022*

01/06/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: *12/02/2022*

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

17 Record Confidentiality

1. Requirements

2600.

17. Resident records shall be confidential, and, except in emergencies, may not be accessible to anyone other than the resident, the resident's designated person if any, staff persons for the purpose of providing services to the resident, agents of the Department and the long term care ombudsman without the written consent of the resident, an individual holding the resident's power of attorney for health care or health care proxy or a resident's designated person, or if a court orders disclosure.

Description of Violation

Upon entering the home on 9/22/22 the Administrator's office was unlocked and accessible. The office contained resident records and other confidential information of the residents.

POC Submission

Accept (████ - 11/28/2022)

Office doors will be closed and locked when office personnel are not in the office to protect the confidentiality of the residents and staff. Ultimately it is this administrators responsibility to ensure this is done every time we leave the office to comply with state reg 17

Licensee's Plan Completion Date: 10/25/2022

Implemented (████ - 01/06/2023)

142d Secure Preventative Care

2. Requirements

2600.

- 142.d. The home shall assist the resident to secure preventative medical, dental, vision and behavioral health care as requested by a physician, physician's assistant or certified registered nurse practitioner.

Description of Violation

Resident #1 was seen by the urologist on █████. The doctor ordered and sent the prescription to a pharmacy other than the one the home uses. The discharge paperwork for this visit noted the prescription was sent to the other pharmacy. The home did not secure the preventative medical care by arranging the pickup of the prescription from the other pharmacy where the residents medication was filled and awaiting pick up.

POC Submission

Accept (████ - 11/28/2022)

Unable to correct at time of inspection but moving forward, we will ensure that meds that are ordered will be received even if it is from a different pharmacy. Ultimately it is this administrators responsibility to ensure that this occurs to comply with state reg 142.d

Licensee's Plan Completion Date: 10/25/2022

Implemented (████ - 01/06/2023)

183b Meds and Syringes Locked

3. Requirements

2600.

- 183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

Description of Violation

Upon entering the home on 9/22/22, the medication cart located in the lobby of the home was unlocked and accessible.

183b Meds and Syringes Locked (continued)**POC Submission**

Accept [REDACTED] - 11/28/2022)

Was corrected at time of inspection, moving forward Med staff will be re educated on the importance of locking the cart when not in use. Ultimately it is the responsibility to ensure that the carts are locked when not in use, to comply with state reg 183.b

Licensee's Plan Completion Date: 10/25/2022

Implemented [REDACTED] 01/06/2023)

227d - Support Plan Medical/Dental**4. 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

It has been determined through multiple staff interviews that Resident #1 required a significant amount of assistance. Since approximately [REDACTED] the resident has had a steady decline in health. The resident required a 2 person assist for transfers, was very incontinent of bowel and bladder and was confused. The resident had an indwelling foley catheter as of [REDACTED]. The resident had approximately 4 falls out of the residents recliner due to not remembering to put the foot rest down. The residents RASP dated [REDACTED] notes the resident is independent with transfers, has no problem ambulating, is alert and oriented times 3 and is incontinent of bowel and bladder. The residents RASP has not been updated to reflect the residents current care needs and how the home will meet those needs.

POC Submission

Accept [REDACTED] - 11/28/2022)

Moving forward all RASPs will be updated for a significant change or new services as needed. Ultimately it is this administrators responsibility to ensure that this is done to comply with state reg 227d

Licensee's Plan Completion Date: 10/25/2022

Implemented [REDACTED] - 01/06/2023)