

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

December 7, 2022

[REDACTED], EXECUTIVE DIRECTOR
COUNTRY MEADOWS OF ALLENTOWN LLC
[REDACTED]

RE: COUNTRY MEADOWS OF
ALLENTOWN
430 NORTH KROCKS ROAD
BUILDING 1
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 08/31/2022, 09/01/2022 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: COUNTRY MEADOWS OF ALLENTOWN **License #:** 22693 **License Expiration:** 08/31/2023

Address: 430 NORTH KROCKS ROAD, BUILDING 1, ALLENTOWN, PA 18106

County: LEHIGH **Region:** NORTHEAST

Administrator

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

Legal Entity

Name: COUNTRY MEADOWS OF ALLENTOWN LLC

Address: [REDACTED]

Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: 1 2 **Date:** 06/29/2010 **Issued By:** Upper Macungie Township

Staffing Hours

Resident Support Staff: 38 **Total Daily Staff:** 142 **Waking Staff:** 107

Inspection Information

Type: Full **Notice:** Unannounced **BHA Docket #:**

Reason: Renewal **Exit Conference Date:** 09/01/2022

Inspection Dates and Department Representative

08/31/2022 On Site: [REDACTED]

09/01/2022 On Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 118 **Residents Served:** 66

Secured Dementia Care Unit

In Home: Yes **Area:** n/a **Capacity:** 60 **Residents Served:** 33

Hospice

Current Residents: 7

Number of Residents Who:

Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 66

Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0

Have Mobility Need: 38 **Have Physical Disability:** 1

Inspections / Reviews

08/31/2022 - Full

Lead Inspector: [REDACTED] **Follow Up Type:** POC Submission **Follow Up Date:** 09/29/2022

Inspections / Reviews *(continued)*

11/04/2022 POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/07/2022

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 11/11/2022

12/07/2022 Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/07/2022

Reviewer: [REDACTED]

Follow Up Type: Not Required

3c - Post Current License

1. Requirements

2600.

3.c. The personal care home shall post the current license, a copy of the current license inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

Description of Violation

The licensing inspection summary dated 7/7-7/8/21 was not posted in a public conspicuous area of the home.

POC Submission

Accept (█ - 11/04/2022)

- On 8/31/22 the Executive Director posted a copy of the current license inspection summary dated 7/7-7/8/21 upon notification of its absence.
- Campus Executive Director will ensure that the current license is posted at all times and will routinely monitor for compliance.

Licensee's Plan Completion Date: 10/07/2022

Implemented (█ - 12/07/2022)

18 - Compliance With Laws

2. Requirements

2600.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

The batteries in the carbon monoxide detector located outside the laundry room in memory care were last changed 6/10/19. The batteries are required to be changed annually as per the Care Facilities Carbon Monoxide Standards Act.

POC Submission

Accept (█ - 11/04/2022)

- On 8/31/22 the Maintenance Director replaced the battery in the carbon monoxide detector located outside the laundry room in memory care upon notification of non-compliance.
- All maintenance staff were educated on 9/13/22 to replace batteries in carbon monoxide detectors annually. Sign in sheets provided.
- On 8/31/22 all carbon monoxide detectors were checked and batteries were replaced as needed.
- The maintenance director or designee will ensure compliance ongoing.

Licensee's Plan Completion Date: 10/07/2022

Implemented (█ - 12/07/2022)

162c - Menus Posted

3. Requirements

2600.

162.c. Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

162c - Menus Posted (continued)

Description of Violation

The menu posted in the home's memory care unit were from 8/21-8/27/22 and 8/28-9/3/22. The following weeks menu was not posted.

POC Submission

Accept () - 11/04/2022)

- Director of Dietary Services posted an updated menu for 9/4-9/10/22 in memory care neighborhood upon notification of non-compliance.
- Campus Executive Director and/or Director of Dining will routinely monitor for compliance.

Licensee's Plan Completion Date: 10/07/2022

Implemented () - 12/07/2022)

182b - Prescription Medication

4. Requirements

2600.

182.b. Prescription medication that is not self-administered by a resident shall be administered by one of the following:

4. A staff person who has completed the medication administration training as specified in § 2600.190 (relating to medication administration training) for the administration of oral; topical; eye, nose and ear drop prescription medications; insulin injections and epinephrine injections for insect bites or other allergies.

Description of Violation

Direct care staff member A's most recent annual practicum was completed () An annual practicum for 2021 was not completed.

POC Submission

Accept () - 11/04/2022)

- Since staff member A's most recent annual practicum for 12/2021 could not be produced at the time of inspection, staff member A completed the Medication Associate Training course in its entirety. Staff member A was recertified on 9/1/22. Documentation attached.
- All other medication associates were checked and found compliant in their annual practicum.
- The Director of Nursing or Assistant Director of Nursing will ensure that all medication associates are current with required paperwork at all times.
- The Campus Executive Director will monitor for compliance.

Licensee's Plan Completion Date: 10/07/2022

Implemented () - 12/07/2022)

183d - Prescription Current

5. Requirements

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

Resident #1's PRN () 2 tablets every 4 hours as needed for pain and fever was discontinued on 5/2/22 and was still present in the medication cart.

183d - Prescription Current (continued)

POC Submission

Accept ([redacted] - 11/04/2022)

- Upon discovery of Resident #1's discontinued PRN [redacted] 2 tablets as needed for pain and fever present on the medication cart, it was removed and destroyed 9/1/22.
- DON and ADON educated all nurses and medication associates about removing discontinued medications from medication carts on 9/23/22. Sign in sheets provided.
- DON and/ADON will ensure that all discontinued medications are removed from the med cart upon receipt of the physicians order.

Licensee's Plan Completion Date: 10/07/2022

Implemented [redacted] - 12/07/2022)

185a - Implement Storage Procedures

6. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident #2's PRN [redacted] was not available at the time of the inspection.

POC Submission

Accept ([redacted] - 11/04/2022)

- Upon discovery on 9/1/22 of Resident #2's [redacted] being unavailable for dispensing, nurse on unit reordered medication. It was delivered on 9/1/22 at 20:30 and placed on the med cart.
- Physician was notified of the delay in treatment.
- DON and ADON educated nurses and medication associates on 9/23/22 to ensure medications are always on hand. Sign in sheets provided
- DON and/or ADON will ensure ongoing compliance.

Licensee's Plan Completion Date: 10/07/2022

Implemented [redacted] - 12/07/2022)