

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

March 20, 2023

[REDACTED], EXECUTIVE DIRECTOR
COUNTRY MEADOWS ASSOCIATES II LP
[REDACTED]

RE: COUNTRY MEADOWS OF FORKS
175 NEWLINS ROAD WEST
EASTON, PA, 18040
LICENSE/COC#: 22655

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/14/2023 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information		
Name: COUNTRY MEADOWS OF FORKS	License #: 22655	License Expiration: 08/29/2023
Address: 175 NEWLINS ROAD WEST, EASTON, PA 18040		
County: NORTHAMPTON	Region: NORTHEAST	

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

Legal Entity	
Name: COUNTRY MEADOWS ASSOCIATES II LP	
Address: [REDACTED]	
Phone: 4845443880	Email: packill@countrymeadows.com

Certificate(s) of Occupancy		
Type: I-1	Date: 07/12/2016	Issued By: Forks Twp

Staffing Hours		
Resident Support Staff: 0	Total Daily Staff: 105	Waking Staff: 79

Inspection Information		
Type: Partial	Notice: Unannounced	BHA Docket #:
Reason: Complaint, Incident		Exit Conference Date: 02/14/2023

Inspection Dates and Department Representative	
02/14/2023 - On-Site: [REDACTED]	

Resident Demographic Data as of Inspection Dates			
General Information			
License Capacity: 90		Residents Served: 73	
Special Care Unit			
In Home: Yes	Area: Connections	Capacity: 45	Residents Served: 32
Hospice			
Current Residents: 7			
Number of Residents Who:			
Receive Supplemental Security Income: 0		Are 60 Years of Age or Older: 73	
Diagnosed with Mental Illness: 0		Diagnosed with Intellectual Disability: 0	
Have Mobility Need: 32		Have Physical Disability: 0	

Inspections / Reviews		
02/14/2023 Partial		
Lead Inspector: [REDACTED]	Follow-Up Type: POC Submission	Follow-Up Date: 03/10/2023
03/07/2023 - POC Submission		
Submitted By: [REDACTED]	Date Submitted: 03/09/2023	
Reviewer: [REDACTED]	Follow-Up Type: Document Submission	Follow-Up Date: 03/10/2023

Inspections / Reviews *(continued)*

03/20/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/09/2023

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

42c Dignity/Respect

1. Requirements

2800.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

Staff person A yelled at and used foul language during an interaction with resident#1 on [REDACTED] 3. This incident was witnessed by others and was reported to the administrator by an outside agency staff person.

Plan of Correction

Accept [REDACTED] - 03/07/2023)

- The coworker was immediately placed on suspension on [REDACTED] upon the facility receiving the report.
- An investigation of the incident was conducted and the coworker was terminated from employment on 1/22/23
- The other coworker was re-educated on resident abuse on 1/21/23. Documentation to be provided.
- All coworkers will be retrained on abuse and neglect and mandated reporting by Lindsay Thomas from Northampton Area Agency on Aging on 3/21/23.
- The Administrator or designee will ensure compliance ongoing by conducting resident interviews with 2-3 residents twice a week for 4 weeks beginning 3/2/23 to ensure they are feeling comfortable and respected. Any concerns will be addressed. Documentation to be provided.

Licensee's Proposed Overall Completion Date: 03/02/2023

Implemented [REDACTED] - 03/20/2023)