

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

January 5, 2024

[REDACTED], OPERATIONS ASSISTANT
COLUMBIA HANOVER OPCO, LLC
[REDACTED]
[REDACTED]

RE: THE VERO AT BETHLEHEM
4700 BATH PIKE
BETHLEHEM, PA, 18017
LICENSE/COC#: 23163

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/17/2023 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: THE VERO AT BETHLEHEM License #: 23163 License Expiration: 06/05/2024
Address: 4700 BATH PIKE, BETHLEHEM, PA 18017
County: NORTHAMPTON Region: NORTHEAST

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: COLUMBIA HANOVER OPCO, LLC
Address: [Redacted]
Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 45 Total Daily Staff: 172 Waking Staff: 129

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Complaint, Incident Exit Conference Date: 10/17/2023

Inspection Dates and Department Representative

10/17/2023 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 140 Residents Served: 82

Secured Dementia Care Unit

In Home: Yes Area: n/a Capacity: 34 Residents Served: 34

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 82
Diagnosed with Mental Illness: 5 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 45 Have Physical Disability: 2

Inspections / Reviews

10/17/2023 - Partial

Lead Inspector: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 11/16/2023

11/30/2023 - POC Submission

Submitted By: [Redacted] Date Submitted: 12/11/2023
Reviewer: [Redacted] Follow-Up Type: Document Submission Follow-Up Date: 12/06/2023

Inspections / Reviews *(continued)*

01/05/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/11/2023

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

15c - Supervision

1. Requirements

2600.

15.c. The home shall immediately submit to the Department's personal care home regional office a plan of supervision or notice of suspension of the affected staff person.

Description of Violation

Resident #1 made an allegation of abuse against staff member A on [REDACTED]/23. The home immediately suspended the staff member pending the home's internal investigation. Staff member A returned to work on [REDACTED]-23 after the home completed their internal investigation. The home did not contact the Northeast regional office regarding a plan of supervision for staff member A until the Department completed their investigation.

Plan of Correction

Accept [REDACTED] - 11/30/2023)

Healthcare Director provided the following written education on 10/18-10/20 to ALL staff members regarding regulation 2600.

2600.15. Abuse reporting covered by law.

(a) The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

(b) If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

(c) The home shall immediately submit to the Department's personal care home regional office a plan of supervision or notice of suspension of the affected staff person.

(d) The home shall immediately notify the resident and the resident's designated person of a report of suspected abuse or neglect involving the resident.

Residence Director will ensure that all new staff members receive their required training regarding Abuse reporting within the first 40 hours of employment. All new associate files will be audited for 60 days. Residence Director will immediately report any suspected abuse or notice of suspension to BHSL in addition to the AAA office.

Proposed Overall Completion Date: 11/21/2023

Administrator will monitor for ongoing compliance. [REDACTED]

Licensee's Proposed Overall Completion Date: 11/21/2023

Implemented [REDACTED] - 01/05/2024)

54a - Direct Care Staff

2. Requirements

2600.

54.a. Direct care staff persons shall have the following qualifications:

2. Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry.

Description of Violation

Direct care staff person A, does not have a high school diploma from the United States of America, GED, or active registry status on the Pennsylvania nurse aide registry.

The high school diploma presented is printed in [REDACTED] and is from [REDACTED]. There is no waiver for this diploma.

54a - Direct Care Staff (continued)

Plan of Correction

Accept [redacted] - 11/30/2023)

Residence Director provided verbal education on 10/18/23 related to ALL qualifications for direct care staff to Customer Service Associate (Business Office Manager) who handles ALL new associate on-boarding. All employee files were audited on 10/18 to ensure qualifications were met. Waiver was completed and faxed to [redacted] on 10/23/23. Translation was completed on 10/26/23 through approved website recommended by BHSL representative. Associate worked in a non-direct care role (housekeeping and dining) until translation was completed. Please see both attached documents. Residence Director will continue to audit all new associate files for the next 60 days to make sure requirements are met.

Proposed Overall Completion Date: 11/21/2023

Administrator will monitor for ongoing compliance. [redacted]

Licensee's Proposed Overall Completion Date: 11/21/2023

Implemented [redacted] - 01/05/2024)