

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

March 19, 2024

[REDACTED]
ALEXANDRIA MANOR OF ALLENTOWN INC
[REDACTED]

RE: ALEXANDRIA MANOR
7 SOUTH NEW STREET
NAZARETH, PA, 18064
LICENSE/COC#: 21064

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/14/2024 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 License #: 21064 License Expiration: 05/15/2024
 Address: 7 SOUTH NEW STREET, NAZARETH, PA 18064
 County: NORTHAMPTON Region: NORTHEAST

Administrator

Name: [REDACTED] Phone: 6107594060 Email: hsmith@alexandriamanor.com / alexandriamanorrb@gmail.com

Legal Entity

Name: ALEXANDRIA MANOR OF ALLENTOWN INC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 05/17/1994 Issued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 78 Waking Staff: 59

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #: [REDACTED]
 Reason: Incident Exit Conference Date: 02/14/2024

Inspection Dates and Department Representative

02/14/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 93 Residents Served: 74
 Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:
 Hospice
 Current Residents: 16
 Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 73
 Diagnosed with Mental Illness: 4 Diagnosed with Intellectual Disability: 3
 Have Mobility Need: 4 Have Physical Disability: 0

Inspections / Reviews

02/14/2024 - Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 03/08/2024

Inspections / Reviews (*continued*)

03/19/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 03/19/2024

Reviewer: [REDACTED]

Follow-Up Type: *Bypass Document
Submission*

03/19/2024 - Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/19/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

187d - Follow Prescriber's Orders

1. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident [REDACTED] returned from a hospital visit on [REDACTED] with orders for wound care for a leg wound. The orders stated the resident's wound was to be cleansed and re-banded every other day. The home did not have adequate documentation that wound care was completed every other day and wound care was discontinued prior to a physician discontinuing the order for wound care.

Plan of Correction

Accept [REDACTED] - 03/19/2024)

The Med Tech responsible for citation to Regulation 187.d received a written warning and re-education in Regulation 187.d on 2/16/2024. All Med Techs are responsible to follow the directions of the prescriber. Prescribed orders and medications will be audited by the designated med tech for each floor on a weekly basis and a monthly basis for cycle change over. The Administrator/Designee will oversee all medication/prescribed orders thereafter. Documentation of written warning and re-education attached. HSmith, Administrator

Licensee's Proposed Overall Completion Date: 03/08/2024

Implemented [REDACTED] - 03/19/2024)

227d - Support Plan Medical/Dental

2. 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

Resident [REDACTED] returned to the home from a hospital visit on [REDACTED] with orders for wound care which the home's staff was responsible to provide. The support plan dated [REDACTED] was not updated regarding the need for wound care.

Plan of Correction

Accept [REDACTED] 03/19/2024)

[REDACTED], Assistant Administrator is responsible for the completion and updating of all Resident's Support Plans. [REDACTED] received a written warning and re-education in Regulation 227d. All necessary orders received will be collected by [REDACTED] to correctly and adequately update all support plans reflecting any changes and/or new orders to maintain compliance with DHS regulations. Administrator, Heather Smith will oversee and assist with the collection and updating of any and all resident support plans. Documentation of written warning and re-education attached. [REDACTED], Administrator

Licensee's Proposed Overall Completion Date: 03/08/2024

Implemented [REDACTED] 03/19/2024)