

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

May 21, 2024

[REDACTED]
MOUNT TREXLER MANOR CORPORATION
[REDACTED]

RE: ACTION RECOVERY
5201 ST. JOSEPH'S ROAD
LIMEPORT, PA, 18060
LICENSE/COC#: 22687

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 04/02/2024 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: ACTION RECOVERY License #: 22687 License Expiration: 09/26/2024
 Address: 5201 ST. JOSEPH'S ROAD, LIMEPORT, PA 18060
 County: LEHIGH Region: NORTHEAST

Administrator

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

Legal Entity

Name: MOUNT TREXLER MANOR CORPORATION
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 06/22/1996 Issued By: L & I

Staffing Hours

Resident Support Staff: 8 Total Daily Staff: 16 Waking Staff: 12

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Complaint, Incident Exit Conference Date: 04/02/2024

Inspection Dates and Department Representative

04/02/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 8 Residents Served: 8

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 8 Are 60 Years of Age or Older: 0
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

04/02/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 04/25/2024

05/01/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: 05/21/2024
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 05/07/2024

Inspections / Reviews *(continued)*

05/21/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/21/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

Resident [REDACTED] has a history of self-harm and taking medications that do not belong to them. For this reason, the home indicated that the Resident has been on 1:1 supervision since [REDACTED]. On [REDACTED] Resident [REDACTED] was able to go into the medication room and take an unknown amount of another resident's medication resulting in hospitalization.

Plan of Correction

Accept [REDACTED] - 05/01/2024)

Plan of Correction:

- Resident [REDACTED] was monitored in med/surg and behavioral health unit. There was no evidence of pills in [REDACTED] bedroom, but empty pills bottles were discovered. The hospital could not conclude if the pills were ingested. Resident [REDACTED] could not recall the incident and refused to provide information about the incident.
- Investigation determined that Resident [REDACTED] was not receiving appropriate supervision at the time of this incident, so a telephone report to the Area Agency on Aging was completed.
- The 1:1 staff responsible for Resident [REDACTED] was terminated pending investigation results.
- Resident [REDACTED] remains in the hospital and has been assessed to require a higher level of care than this facility can provide. This case has been referred to CHC LTSS Triage Care Management department for special attention to meet next placements needs.
- Resident [REDACTED] was discharged from NV on [REDACTED].
- 2600.42b will be maintained and the Administrator will ensure compliance and safety of all residents.

Licensee's Proposed Overall Completion Date: 04/25/2024

Implemented [REDACTED] - 05/21/2024)

183b - Meds and Syringes Locked

2. 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

On [REDACTED] Medication room was unlocked, which resulted in Resident [REDACTED] entering and taking another Resident's medication.

Plan of Correction

Accept [REDACTED] - 05/01/2024)

Plan of Correction:

- Investigation of findings of the incident on [REDACTED] concluded that the medication room may have been left open due to a security breach. It was determined that the room may have been left ajar due to a failure in our system.
- In response to the findings, enhanced security actions were implemented.
 1. Physical key access has been removed from the med room. Going forward, only key fob access will be allowed as of [REDACTED]
 2. A single key fob was added to the med cart keys. The med room can only be entered by the med tech who physically has the keys in possession. The med room access will be monitored via key fob and recorded by video camera.

183b - Meds and Syringes Locked (continued)

3. Resident [REDACTED] bedroom was moved further away on the unit west of the med room.

4. The Med Room staff in question was suspended pending investigation. Staff were given a final write-up on [REDACTED] for not locking the med cart. The staff is required to complete remediation of med tech training, shadowing, and observation for 3 weeks by an instructor or supervisor.

A med tech training by the facility nurse was conducted on [REDACTED] for debriefing of incident and new med room protocols.

- The nurse will ensure med room compliance.
- The Administrator will ensure compliance of 2600. 183.b regulations.

Licensee's Proposed Overall Completion Date: 04/25/2024

Implemented [REDACTED] - 05/21/2024)