

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

June 17, 2024

[REDACTED], ADMINISTRATOR
SALISBURY BEHAVIORAL HEALTH LLC
[REDACTED]
[REDACTED]

RE: SALISBURY BEHAVIORAL HEALTH
513 LEHIGH STREET
ALLENTOWN, PA, 18103
LICENSE/COC#: 21674

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/29/2024, 06/03/2024 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: SALISBURY BEHAVIORAL HEALTH **License #:** 21674 **License Expiration:** 03/26/2025
Address: 513 LEHIGH STREET, ALLENTOWN, PA 18103
County: LEHIGH **Region:** NORTHEAST

Administrator

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

Legal Entity

Name: SALISBURY BEHAVIORAL HEALTH LLC
Address: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP **Date:** 07/12/1999 **Issued By:** PA Dept. L&I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 20 **Waking Staff:** 15

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint, Interim **Exit Conference Date:** 06/03/2024

Inspection Dates and Department Representative

05/29/2024 - On-Site: [REDACTED]
06/03/2024 - Off-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information			
License Capacity: 20	Residents Served: 20		
Secured Dementia Care Unit			
In Home: No	Area:	Capacity:	Residents Served:
Hospice			
Current Residents: 0			
Number of Residents Who:			
Receive Supplemental Security Income: 20	Are 60 Years of Age or Older: 14		
Diagnosed with Mental Illness: 17	Diagnosed with Intellectual Disability: 3		
Have Mobility Need: 0	Have Physical Disability: 0		

Inspections / Reviews

05/29/2024 Partial
Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 06/16/2024

Inspections / Reviews *(continued)*

06/17/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/17/2024

Reviewer: [REDACTED]

Follow Up Type: *Bypass Document Submission*

06/17/2024 Bypass Document Submission

Submitted [REDACTED]

Date Submitted: 06/17/2024

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

85a - Sanitary Conditions**1. Requirements**

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

Upon inspection, dried blood was noted on Resident #1's glucometer.

Plan of Correction

Accept (█) - 06/17/2024)

All staff were retrained on 6/12/2024 on exposure control and hazard communication. Moving forward, all staff are expected to thoroughly inspect all glucometers when prompted by Quickmar after each medication pass has been completed. Staff will also extend the responsibility to each resident and prompt them to wipe down their glucometer immediately after each use prior to returning it to the medication cart. The administrator will conduct random weekly checks of each glucometer to see if there is any evidence that this process is not being followed by staff.

Licensee's Proposed Overall Completion Date: 06/14/2024

Implemented (█) - 06/17/2024)