

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

October 18, 2024

[REDACTED]
LW ALLENTOWN OPCO LLC
[REDACTED]

RE: LEGEND PERSONAL CARE AND
MEMORY CARE OF ALLENTOWN
6043 LOWER MACUNGIE ROAD
MACUNGIE, PA, 18062
LICENSE/COC#: 23139

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/15/2024 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: LEGEND PERSONAL CARE AND MEMORY CARE OF ALLENTOWN License #: 23139 License Expiration: 12/11/2024

Address: 6043 LOWER MACUNGIE ROAD, MACUNGIE, PA 18062

County: LEHIGH

Region: NORTHEAST

Administrator

Name: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Legal Entity

Name: LW ALLENTOWN OPCO LLC

Address: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Certificate(s) of Occupancy

Type: I 1

Date: 05/18/2018

Issued By: Lower Macungie Township

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 88

Waking Staff: 66

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Complaint, Incident

Exit Conference Date: 08/15/2024

Inspection Dates and Department Representative

08/15/2024 On Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 100

Residents Served: 67

Secured Dementia Care Unit

In Home: Yes

Area: 0

Capacity: 32

Residents Served: 21

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 67

Diagnosed with Mental Illness: 0

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 21

Have Physical Disability: 0

Inspections / Reviews

08/15/2024 - Partial

Lead Inspector: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 09/07/2024

09/09/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/26/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 09/16/2024

Inspections / Reviews *(continued)*

10/18/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/26/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

23a - Activities of Daily Living Assistance

1. Requirements

2600.

23.a. A home shall provide each resident with assistance with ADLs as indicated in the resident's assessment and support plan.

Description of Violation

The assessment and support plan, dated [REDACTED], for resident [REDACTED] indicates the resident requires assistance with bladder management and needs assistance changing soiled undergarments. On [REDACTED], the resident did not receive this assistance as required and had called for assistance, but no staff came to assist them.

Repeat Violation 4/18/24, et all

Plan of Correction

Accept [REDACTED] - 09/09/2024)

The home failed to consistently follow the support plan outlining the care needs of resident [REDACTED] regarding bladder management and assistance changing soiled undergarments as outlined in the support plan. Resident [REDACTED] is no longer a resident at the home.

On [REDACTED] the Healthcare Director and Assistant Healthcare Director took the initiative to re-educate the current direct care staff on Regulation 2600.23a, Activities of Daily Living. This training session allowed them to review and educate nursing staff on the support plan and procedures.

Beginning [REDACTED], the Medication Technician shall audit at least 2 resident at least three times a week and submit the audit to the Healthcare Director and Assistant Healthcare Director for final review and signature.

Starting [REDACTED], the Healthcare Director/Assistant Healthcare Director and/or designee will review the audits, reaffirming our commitment to compliance with Regulation 2600.23a. Any necessary re-education will be provided to ensure full compliance, and audits will be retained for reference.

Licensee's Proposed Overall Completion Date: 09/05/2024

Implemented [REDACTED] - 09/27/2024)

42c - Treatment of Residents

2. Requirements

2600.

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

Description of Violation

During an interview with Resident [REDACTED] it was reported that resident [REDACTED] was scolded by Staff A for having incontinence accidents, Staff A grabbed Residents [REDACTED] pants and pulled them up like rubber bands, and then changed the depends in residents living room instead of taking resident to the bathroom. Resident [REDACTED] was fearful staff A would come back and scold resident again if this information was reported back to Staff A. Resident [REDACTED] stated Resident was fearful of staff A. Resident [REDACTED] reported that Staff A is mean, abrasive, and rushed with care.

Plan of Correction

Accept [REDACTED] - 09/09/2024)

On [REDACTED], it was identified that Staff Person A was identified by Resident [REDACTED] as being rough with care. The community failed to protect the residents from abuse and neglect.

42c - Treatment of Residents (continued)

On [REDACTED] the Administrator interviewed seven residents on satisfaction of care, and no additional concerns of mistreatment were noted. On [REDACTED], Staff Person A was interviewed, and their statements were documented. The Administrator took immediate action, suspending Staff Person A and terminating them.

The Administrator and Healthcare Director re-educated current associates on [REDACTED] on the steps set by Adult Protective Services abuse reporting protocol and Regulation 2600.42c, Treatment of Residents. This training will continue with new hires to ensure the critical nature of the timeliness of reporting.

The Lehigh Valley Ombudsman will also provide education on the Older Adult Protective Services Act, Resident's Rights, and Mandatory Reporting by [REDACTED]

Residents are regularly informed of their rights (upon admission and during resident council). They are and will continue to be encouraged to report if someone is allegedly mistreating or neglecting them promptly.

Beginning [REDACTED], the Life Enrichment Coordinator/designee will utilize an Audit tool to review Resident Rights and the Complaint Process at our monthly Resident Council Meeting and ensure Resident Rights are posted on the residence community Bulletin Board. The audit tool and the Resident Council Meeting Minutes will be submitted to the Administrator for review.

Starting [REDACTED] the HealthCare Director/AHCD will conduct private interviews with five residents in the home each month for three months to ensure they feel safe from neglect or abuse. These interviews will be discussed in the monthly QMPI meeting scheduled for [REDACTED]. Documentation of these interviews will be kept in the Administrator's office.

Licensee's Proposed Overall Completion Date: 09/26/2024

Implemented [REDACTED] - 09/27/2024)

85a Sanitary Conditions

3. Requirements

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

On [REDACTED], Upon entering resident [REDACTED] room, a soiled depends was laying on the floor next to the resident recliner and a wet substance was in the carpet next to the recliner that looked like urine. The resident stated that they called for assistance earlier in the day but that no staff responded to assist him.

Plan of Correction

Accept [REDACTED] - 09/09/2024)

The Maintenance Director and Housekeeping team cleaned Resident [REDACTED] bedroom on [REDACTED].

The Maintenance Director audited all resident rooms on [REDACTED] to ensure compliance with 2600.85a Sanitary Conditions.

Beginning [REDACTED] the weekly housekeeping cleaning schedule has been updated to include documentation of room cleaning by housekeeping for every room they clean.

85a - Sanitary Conditions (continued)

By [REDACTED], the Maintenance Director or designee will conduct a vital re-education session for our current associates. This session will focus on the correct procedures for accessing cleaning products for quick clean-ups and the appropriate methods for reporting in-depth cleaning and maintenance needs to the maintenance department. The documentation of this session will serve as a valuable resource for our staff.

Adherence to 2600.85a, Sanitary Conditions, will be rigorously monitored during our regularly scheduled Quality Assurance meetings, beginning 9/26/24. This is a critical step in ensuring compliance with regulations and the safety of our residents. Comprehensive documentation of these meetings will be maintained for reference.

Licensee's Proposed Overall Completion Date: 09/26/2024

Implemented [REDACTED] - 09/27/2024)