

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

September 25, 2024

TIMOTHY BUCHANAN, MANAGER
LW ALLENTOWN OPCO LLC
4500 DORR STREET
TOLEDO, OH, 43615

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

Dear Mr. Timothy Buchanan,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/28/2024 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,
Jason Harvey
Human Services Licensing Supervisor

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: *Kimberly Carhart* Phone: *267-897-5384* Email: *kimberly.carhart@legendseniorliving.com*

Legal Entity

Name: *LW ALLENTOWN OPCO LLC*

Address: *4500 DORR STREET, TOLEDO, OH, 43615*

Phone: *6104260223* Email: *LICENSURE@WELLTOWER.COM*

Certificate(s) of Occupancy

Type: *I-1* Date: *05/18/2018* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *88* Waking Staff: *66*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:

Reason: *Complaint* Exit Conference Date: *08/28/2024*

Inspection Dates and Department Representative

08/28/2024 - On-Site: Amy Deluca

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *100* Residents Served: *68*

Secured Dementia Care Unit

In Home: *Yes* Area: *na* Capacity: *40* Residents Served: *20*

Hospice

Current Residents: *10*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *68*

Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*

Have Mobility Need: *20* Have Physical Disability: *0*

Inspections / Reviews

08/28/2024 - Partial

Lead Inspector: *Amy Deluca* Follow-Up Type: *POC Submission* Follow-Up Date: *09/16/2024*

09/20/2024 - POC Submission

Submitted By: *Andrea DiOttavio* Date Submitted: *09/23/2024*

Reviewer: *Jason Harvey* Follow-Up Type: *Document Submission* Follow-Up Date: *09/25/2024*

Inspections / Reviews (*continued*)

09/25/2024 - Document Submission

Submitted By: *Andrea DiOttavio*Date Submitted: *09/23/2024*Reviewer: *Jason Harvey*Follow-Up Type: *Not Required*

121a - Unobstructed Egress

1. Requirements

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

Through information received from a complaint and staff interviews it was determined that the door leading from personal care to the memory care unit was not functioning for a period of around two weeks. During this time, the door to exit the memory care unit to personal care would not always open when the code was entered on the keypad. This prevented staff and family members from exiting the unit through this door.

Plan of Correction

Accept (JH - 09/20/2024)

Before 8/28/24, the department received information that the keypad used to enter/exit the memory care from personal care had not been functioning correctly. The department proved this through interviews on 8/28/24, not functionality testing.

Prior to the inspection, on 8/22/24, the department successfully replaced the malfunctioning keypads, resolving the issue and ensuring smooth operations.

Starting from 9/13/24, the department has implemented a comprehensive monitoring plan. The keypads will be checked during weekly audits until 10/11/24 to ensure the repair has permanently corrected the issue.

From 11/1/24, the Director of Maintenance or their designee will take on the responsibility of monitoring the keypads through monthly inspections. All documentation will be meticulously maintained in TELS, the community's online building management tracker.

Audits on Regulation 2600.121a, Unobstructed Egress, will be retained and reviewed as part of monthly Quality Assurance (QA) meetings commencing on 9/26/24, and the Administrator will maintain the documentation in the QA report.

Licensee's Proposed Overall Completion Date: 10/15/2024

Implemented (JH - 09/25/2024)