

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

April 14, 2025

[REDACTED]  
WALDEN CARE LLC  
[REDACTED]

RE: WALDEN III SENIOR LIVING  
COMMUNITY  
325 NORTH BROADWAY  
WIND GAP, PA, 18091  
LICENSE/COC#: 23072

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/14/2025, 03/24/2025 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:** WALDEN III SENIOR LIVING COMMUNITY      **License #:** 23072      **License Expiration:** 05/02/2025  
**Address:** 325 NORTH BROADWAY, WIND GAP, PA 18091  
**County:** NORTHAMPTON      **Region:** NORTHEAST

**Administrator**

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

**Legal Entity**

**Name:** WALDEN CARE LLC  
**Address:** [REDACTED]  
**Phone:** [REDACTED]      **Email:** [REDACTED]

**Certificate(s) of Occupancy**

**Type:** C-2 LP      **Date:** 10/28/1994      **Issued By:** L&I

**Staffing Hours**

**Resident Support Staff:** 0      **Total Daily Staff:** 43      **Waking Staff:** 32

**Inspection Information**

**Type:** Partial      **Notice:** Unannounced      **BHA Docket #:**  
**Reason:** Complaint, Incident      **Exit Conference Date:** 03/24/2025

**Inspection Dates and Department Representative**

03/14/2025 - On-Site: [REDACTED]  
 03/24/2025 - Off-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 77      **Residents Served:** 40

**Secured Dementia Care Unit**

**In Home:** No      **Area:**      **Capacity:**      **Residents Served:**

**Hospice**

**Current Residents:** 5

**Number of Residents Who:**

**Receive Supplemental Security Income:** 0      **Are 60 Years of Age or Older:** 40  
**Diagnosed with Mental Illness:** 0      **Diagnosed with Intellectual Disability:** 0  
**Have Mobility Need:** 3      **Have Physical Disability:** 0

**Inspections / Reviews**

03/14/2025 Partial

**Lead Inspector:** [REDACTED]      **Follow-Up Type:** POC Submission      **Follow-Up Date:** 04/11/2025

Inspections / Reviews *(continued)*

04/14/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/14/2025

Reviewer: [REDACTED]

Follow Up Type: *Bypass Document Submission*

04/14/2025 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/14/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

141a 1 10 Medical Evaluation Information

1. Requirements

2600.

141.a. A resident shall have a medical evaluation by a physician, physician’s assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:

1. A general physical examination by a physician, physician’s assistant or nurse practitioner.
2. Medical diagnosis including physical or mental disabilities of the resident, if any.
3. Medical information pertinent to diagnosis and treatment in case of an emergency.
4. Special health or dietary needs of the resident.
5. Allergies.
6. Immunization history.
7. Medication regimen, contraindicated medications, medication side effects and the ability to self administer medications.
8. Body positioning and movement stimulation for residents, if appropriate.
9. Health status.
10. Mobility assessment, updated annually or at the Department’s request.

Description of Violation

The initial Medical Evaluation dated [REDACTED] for resident [REDACTED] was missing the resident’s height and weight.  
 The initial Medical Evaluation dated [REDACTED] for resident [REDACTED] was missing the resident’s height and weight.

Plan of Correction

Accept [REDACTED] 04/14/2025)

How did this happen?

On [REDACTED], Residents [REDACTED] and [REDACTED] entered the facility as permanent residents. Upon admission, their height and weight were not recorded on the DME per regulation 2600.141.a.

Plan of correction:

On 03/14/2025, Med Tech Supervisor [REDACTED] went to the residents' room and weighed and measured the heights of Residents [REDACTED] and [REDACTED]. The readings were immediately recorded on the DME.

Moving forward:

Starting on 03/15/2025, the administrator [REDACTED] audited all existing resident DMEs, to ensure that all the necessary information was recorded correctly. As we move forward, this audit will be conducted monthly.

Licensee's Proposed Overall Completion Date: 04/11/2025

Implemented [REDACTED] - 04/14/2025)

225c Additional Assessment

2. Requirements

2600.

225.c. The resident shall have additional assessments as follows:

2. If the condition of the resident significantly changes prior to the annual assessment.

Description of Violation

On [REDACTED] at approximately 6:00 p.m. resident [REDACTED] eloped from the home and was found approximately 3 hours later in a nearby wooded area by a search and rescue team. Resident [REDACTED] support plan dated [REDACTED] was not updated after this incident to address the resident’s increased need for close supervision in the home.

## 225c Additional Assessment (continued)

**Plan of Correction****Accept** [REDACTED] - 04/14/2025)*How this happened:*

Resident [REDACTED] eloped from the facility on March 3rd, 2025. Search and rescue located [REDACTED] in the neighboring property.

At the time of [REDACTED] RASP on 12/16/2024, it was not clear or known that the resident was an elopement risk.

*Plan of correction:*

On 03/15/2025, Resident [REDACTED] RASP was immediately updated with the need for closer supervision and the noted the tracking bracelet the family provided.

*Moving forward:*

The resident's RASP was updated with the following information: The family has provided a tracking watch for their loved one, Resident [REDACTED]. It signals a message to the family, the administrator, the med tech supervisor, and the second shift med tech. When the resident walks freely about the building or leaves the building with family, a message of the resident's location is sent to those listed above.

On 03/15/2025, the residents' DMEs and Support Plan were updated to ensure that all the necessary information was recorded correctly.

03/15/2025: The Administrator audited all existing RASPs to ensure this doesn't occur again. The audit will continue throughout the coming months to ensure that this information regarding new resident DMEs and RASPs is not overlooked.

**Licensee's Proposed Overall Completion Date: 04/11/2025****Implemented** [REDACTED] - 04/14/2025)