

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

November 18, 2025

[REDACTED]  
COUNTRY MEADOWS OF NORTHAMPTON ASSOCIATES LP  
[REDACTED]

RE: COUNTRY MEADOWS OF  
BETHLEHEM V  
4025 GREEN POND ROAD  
BETHLEHEM, PA, 18020  
LICENSE/COC#: 20075

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/21/2025 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:** COUNTRY MEADOWS OF BETHLEHEM V      **License #:** 20075      **License Expiration:** 12/08/2025

**Address:** 4025 GREEN POND ROAD, BETHLEHEM, PA 18020

**County:** NORTHAMPTON      **Region:** NORTHEAST

**Administrator**

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

**Legal Entity**

**Name:** COUNTRY MEADOWS OF NORTHAMPTON ASSOCIATES LP

**Address:** [REDACTED]

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

**Certificate(s) of Occupancy**

**Type:** 1 2      **Date:** 02/25/2014      **Issued By:** L&I

**Staffing Hours**

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

**Inspection Information**

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

**Reason:** Renewal      **Exit Conference Date:** 10/21/2025

**Inspection Dates and Department Representative**

10/21/2025    **On Site:** [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

**License Capacity:** 126      **Residents Served:** 73

**Secured Dementia Care Unit**

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

**Hospice**

**Current Residents:** 6

**Number of Residents Who:**

**Receive Supplemental Security Income:** 0      **Are 60 Years of Age or Older:** 73

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

**Have Mobility Need:** 15      **Have Physical Disability:** 1

**Inspections / Reviews**

10/21/2025 - Full

**Lead Inspector:** [REDACTED]      **Follow Up Type:** POC Submission      **Follow Up Date:** 11/15/2025

Inspections / Reviews (*continued*)

11/14/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/18/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 11/19/2025

11/18/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/18/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

183e - Storing Medications

1. Requirements

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

Description of Violation

At 3:10 P.M. the home's medication cart contained resident [redacted] medication [redacted] had no date of opening. According to the manufacturer's instructions the medication should be used within 28 days of opening.

At 3:00 P.M. the home's medication cart contained resident [redacted] [redacted] which had no date of first being opened. According to the manufacturer's instructions the medication should be used within 6 weeks of opening.

Plan of Correction

Accept [redacted] - 11/14/2025)

- On October 21st 2025, the nurse and Medication Associate immediately replaced the insulin pen and dated both medications upon identification of the issue.
- A medication Cart Audit was completed by the Director of Nursing (DON) on October 21st, 2025 to verify that all medications to ensure that each item requiring an open date was properly labeled in accordance with manufacturer instructions.
- Retraining on following the manufactures instructions will be conducted on or before November 21st, 2025 by the DON for the Coworkers who administer medications.
- An audit will be conducted weekly over the next 4 weeks focusing on checking for proper labeling of all opened medications. This will ensure that all medications, including injectables, have been labeled correctly with the date of opening, and are stored according to manufacturer guidelines. The Director of Nursing or designee will conduct the audit and document findings. This will begin on or before 11/16/25.

Licensee's Proposed Overall Completion Date: 11/21/2025

Implemented [redacted] 11/18/2025)

185a - Implement Storage Procedures

2. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

At 3:30 P.M. 5 oxygen tanks were observed being stored directly on the floor in resident room [redacted]

Plan of Correction

Accept [redacted] - 11/14/2025)

- On October 21st 2025, all five oxygen tanks were immediately removed from resident room #34 and were placed in an approved oxygen storage rack in accordance with facility procedures and safety standards.
- The Executive Director confirmed that all other oxygen tanks within the licensed facility were verified to be properly stored in designated areas in proper storage rack on October 21st, 2025.
- Direct care, maintenance, and housekeeping coworkers will receive retraining on proper storage procedures for oxygen tanks by the Executive Director or designee on or before November 21st 2025.
- Compliance with proper storage procedures will be monitored by the Executive Director and Manager to ensure compliance.

**185a Implement Storage Procedures (continued)**

- *An audit will be conducted weekly for the next 4 weeks to verify that oxygen tanks are stored properly in approved racks and are not placed on the floor in any resident rooms. The audit will verify that storage racks are in place and used properly. The Executive Director, or designee will conduct and document the audits. This will begin on or before 11/16/25.*

Licensee's Proposed Overall Completion Date: 11/21/2025

Implemented [REDACTED] - 11/18/2025)