



**pennsylvania**  
DEPARTMENT OF AGING

03/10/2015

Jonathan Jones  
Director  
Lehigh Valley Adult Services  
3421 Nightingale Drive, Suite #2  
Easton, PA 18045

RE: Lehigh Valley Adult Services  
License # 345474- Interim

Dear Mr. Jones:

As a result of the Department of Aging's Licensing Inspection on 02/26/2015, an Interim license was issued. An Interim license is issued if the applicant is suitable, the premises are safe and the applicant is likely to comply substantially with applicable statutes, ordinances and regulations prior to expiration of the Interim license.

An Interim license is not renewable. At the expiration of an Interim license, the Department may issue a Regular license or a maximum of one Provisional license.

Thank you for your continued effort to provide older adult daily living services. If you have questions, please contact me at (717) 214-6716.

Sincerely,

A handwritten signature in black ink, appearing to read 'Kevin Longenecker'.

Kevin Longenecker  
Director

Enclosures

COMMONWEALTH OF PENNSYLVANIA  
DEPARTMENT OF AGING

# LICENSE

This license is hereby granted to LEHIGH VALLEY ADULT SERVICES - HOPE CENTERS  
LEGAL ENTITY

To operate LEHIGH VALLEY ADULT SERVICES  
(NAME OF CENTER)

Located at 3421 NIGHTINGALE DRIVE, SUITE #2 EASTON, PA 18045  
(COMPLETE ADDRESS OF CENTER)

To provide older adult daily living services.

The total number of persons which may be served at one time may not exceed 30  
(MAXIMUM CAPACITY)

Restrictions: \_\_\_\_\_

This license is granted in accordance with the Act of July 11, 1990 (P.L. 499, No. 118) and Regulations.

TITLE 6. PA CODE. CHAP. 11. OLDER ADULT DAILY LIVING CENTER Dated July 03, 1993  
(NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from March 02, 2015 until August 31, 2015

unless sooner revoked for non-compliance with applicable laws and regulations.

No: 345474 - Interim



ISSUING OFFICER

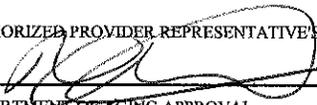
NOTE: This license is issued for the above address only and is not transferable. This license should be posted in a conspicuous place in the center.

Issued On: March 10, 2015

AGL01

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER LICENSE NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>02/26/2015</b>
NAME OF PROVIDER OR SUPPLIER <b>Lehigh Valley Adult Services Day Center</b>		STREET ADDRESS, CITY, STATE, ZIP CODE <b>3421 NIGHTINGALE DRIVE, SUITE #2 EASTON, PA 18045</b>		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
1 000	<b>Initial Comments</b>  A State licensure visit was completed on 2/26/15 and it was determined that Lehigh Valley Adult Services Day Center was not in compliance with the following requirements of 6 PA Code, Chapter 11, Older Adult Daily Living Centers regulations:	1 000		
1 420	<b>11.18(a) Criminal history record check</b>  Operators applying to the Department for licensure shall obtain for themselves and for prospective full-time, part-time and temporary program staff persons (including vehicle drivers, but excluding students), the following information:  (1) A report of criminal history record information from the State Police or a statement from the State Police that the State Police Central Repository contains no information relating to that person, under 18 PA. C.S. §§9101-9183 (relating to the Criminal History Record Information Act).  (2) A report of Federal criminal history record information under the Federal Bureau of Investigation appropriation of Title II of the act of October 25, 1972 (Pub. L. 92-544, 86 Stat. 1109), if the operator or employee has not been a resident of this Commonwealth for the 3 years prior to hiring.  This STANDARD is not met as evidenced by:	1 420	POC: Prior to the close of the exit interview a current copy of the contracted LPN's Pennsylvania Criminal Background check was produced.  Future Occurrence: The personnel files of all contracted staff persons will be audited quarterly at the same time as all full and part time staff.  Supporting Documentation: Please see attachment #1.  Person Responsible: Executive Director	02/27/2015

AUTHORIZED PROVIDER REPRESENTATIVE'S SIGNATURE



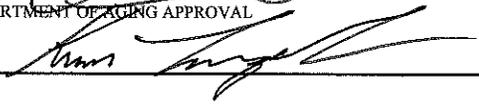
Executive Director

TITLE

(X6) DATE

02/28/2015

DEPARTMENT OF AGING APPROVAL



Chief, Division of Licensing

DATE

3/10/15

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER LICENSE NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING _____ B. WING _____	(X3) DATE SURVEY COMPLETED  <b>02/26/2015</b>
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1 960	<p><b>11.58(a) Surfaces</b></p> <p>Findings: Based on a review of the center's records a criminal history record report dated 03/20/2012 was seen for the LPN who will be providing nursing services to the center. A current criminal history record check dated within one year from the Pennsylvania State Police is required.</p> <p>Floors, walls, ceilings and other surfaces shall be in good repair.</p> <p>This STANDARD is not met as evidenced by:</p>	1 960		
12230	<p><b>11.152 Food provided or arranged for by center</b></p> <p>Findings: Based on a physical site inspection the ventilation fan in the larger restroom was operating loudly, with a rattling sound. Maintenance was contacted with a request to fix the fan. During the inspection a worker came to the center to work on it, left to obtain a part and then returned to continue to work on it. The fan was still being repaired when the inspector left the center.</p> <p>If the center provides or arranges for meals for clients, the following requirements apply:</p>	12230	<p><b>POC:</b> By the close of business on 02/27/2015 the ventilation fan in the larger restroom was replaced.</p> <p><b>Future Occurrence:</b> All appliances, including ventilation fans will be checked during our monthly health and safety inspection to insure that they are in good repair.</p> <p><b>Supporting Documentation:</b> Please see attachment #2 (email from rental property company, notifying LVAS of project completion) and attachment #3 picture of new ventilation fan.</p> <p><b>Person Responsible:</b> Executive Director</p>	02/27/2015

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12230	Continued From page 2 (1) Cold food shall be kept at or below 45°F. Hot food shall be kept at or above 140°F. Frozen food shall be kept at or below 0°F. (2) Written daily menus shall be prepared and posted in a location visible to the clients. Menus shall be posted at least 1 program day prior to the menu date. Written menus shall be followed. Written menus shall be retained for at least 2 months. (3) At least one complete meal shall be provided if the client is at the center for 4 or more hours. If a client is at the center for more than 6 hours, a nutritional snack shall be provided. (4) Each meal served shall contain at least one item from the dairy, protein, fruits and vegetables and grain food groups, unless medically contraindicated for individual clients. (5) Quantity of foods served at each meal shall contain at least 1/3 of the daily-recommended dietary allowances as established by the Food and Nutrition Board of the National Research Council. (6) Prescribed diets for clients with medically restricted diets shall be followed. A written record of prescribed diets shall be kept in the client's file. (7) The ethnic and religious preferences of clients shall be considered when planning menus. (8) Food shall be protected from contamination while being stored, prepared, served and transported. Food shall be stored in sealed containers. (9) Utensils used for eating, drinking, preparation and serving of food or drink shall be washed after each use by a mechanical dishwasher or by a method approved by the Department of Environmental Resources. (10) Mechanical dishwashers shall use hot water	12230	POC: On 02/28/2015 a licensed and registered dietician met with Center Administrators and discussed menus and menu planning. At the conclusion of the meeting the Dietician approved all menus and indicated so with her signature.  Menus/ Calendars will be posted/ affixed to a wall visible to clients in addition to being located on the central desk.  Future Occurrence: Lehigh Valley Adult Services will meet, consultant with and retain the services of the above mentioned dietician on a regular basis.  Supporting Documentation: Please review the follow attachments: Attachment #4: Menus (signed by Dietician), Attachment #5 Credentials of Dietician  Person Responsible: Executive Director	02/28/2015

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12230	<p>Continued From page 3</p> <p>temperatures exceeding 140°F in the wash cycle and 180°F in the final rinse cycle or shall be a chemical sanitizing type approved by the National Sanitation Foundation.</p> <p>This STANDARD is not met as evidenced by:</p> <p>Findings: During a discussion with the Administrator /Director, and the Assistant Director, it was disclosed that the center staff will be cooking the food which will be served at the center. It could not be determined if subsections (4) and (5) would be met based on the menu which was seen, as a dietician had not signed it. A dietician was contacted during the inspection, to review the menus.</p> <p>In addition, the menu was on both the front counter and a table in the program room. Subsection (2) states that menus shall be posted in a location visible to the clients. The Activity calendar was also on the counter and on the table. Regulation 11.123 (4)(ii)(B) states that a monthly calendar of activities shall be posted in a visible place.</p>	12230		