



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via email to: [REDACTED]
MAILING DATE: December 4, 2015

Ms. Nimita Kapoor-Atiyeh, President
Whitehall Manor, Inc.
1177 Sixth Street
Whitehall, Pennsylvania 18052

RE: Whitehall Manor
License # 216650

Dear Ms. Kapoor-Atiyeh:

As a result of the Department of Human Services' licensing inspection on September 29, 2015 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Anne Graziano".

Anne Graziano
Regional Licensing Administrator

Enclosure
Licensing Inspection Summary

VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

PCH Name: WHITEHALL MANOR		License Number: 21665
Address: 1177 SIXTH STREET, WHITEHALL, PA 18052		County: Lehigh
Administrator: Monica Burger		Region: NORTHEAST
Legal Entity Name: WHITEHALL MANOR INC		
Legal Entity Address: 1177 SIXTH STREET, WHITEHALL, PA 18052		
Certificate(s) of Occupancy		
C-2 LP 06/19/2006 L&I	I-1 03/07/2014 Whitehall Township	
Staffing Hours		
Resident Support: 0	Total Daily Staff: 284	Waking Staff: 213
Type of Inspection: Partial	BHA Docket Number:	Notice: Unannounced
Reason(s) for Inspection(s)		
Incident		
On-Site Inspections Dates and Department Representatives On-Site		
09/29/2015: Novak, Ryan; Hummel, Jesse		
Off-Site Inspection Dates and Inspectors, if Applicable		
10/05/2015: Novak, Ryan		
Other Details		
Partial or Full Triggers:		Random Indicators:
Resident Demographic Data as of Inspection Dates		
Licensed Capacity: 215	Number of Residents who:	
Number of Residents Served: 185 193	Receive Supplemental Security Income: 0	
Secured Dementia Care Unit in Home: Yes	Are 60 Years of Age or Older: 185	
Area: n/a	Have Mental Illness: 0	
Secured Dementia Unit Capacity, if Applicable: 78	Have an Intellectual Disability: 0	
Number of Residents Served in Secured Dementia Care Unit, if applicable: 51	Have a Mobility Need: 99	
Number of Current Hospice Residents: 11	Have a Physical Disability: 2	
Number of Hospice Residents in past year: 38		

Violation Report: 21665 - 09/29/2015 - Novak, Ryan
PCH Name: WHITEHALL MANOR

1. REGULATION 55 Pa.Code §2600

2600.161(d) - A resident's special dietary needs as prescribed by a physician, physician's assistant, certified registered nurse practitioner or dietician shall be met. Documentation of the resident's special dietary needs shall be kept in the resident's record.

2a. DESCRIPTION OF VIOLATION

Resident #1's DME dated 7/14/15 notes the resident is to be on a mechanical soft food diet. It has been determined through interviews with staff members that the resident was receiving a normal diet.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Preparation and submission of this Plan of Correction does not constitute an admission or agreement by the personal care home of the truth of the facts alleged or of the correctness of the conclusion set forth on the License Inspection Summary. This Plan of Correction is prepared and submitted to meet requirements under state law. The personal care home reserves any and all applicable rights to appeal rights to appeal pursuant to § 55 Pa. Code 55 Pa. Code 20 et seq. and 2600.263.

To ensure continued compliance with 2600.161 (d), Upon admission marketing/admission team will review medical evaluation and will add the ordered diet to the admission alert. Director of nursing will double check the diet after reviewing the medical-evaluation and any discharge papers received. A specific colored dot will be placed at the resident's table tag at his/her assigned seat in the dining room area. The diet colored dot will be checked on a daily basis by the nursing director, Med-Aide, EMAR Administrator, and will be followed by personal care aides, and dietary staff. Any changes of the dot will be made by director of nursing and EMAR administrator with written order from physician. The resident's record will be updated on RASP and Assignment sheet. An audit was done when violation occurred Med-aide on each unit and nursing director rechecked all residents diet orders to ensure all residents are complaint with diet orders and will continue to follow Dr. orders to ensure continued compliance.

← This was added after the violation. PD. 12-2-15.

alternate POC submitted 12/2/15. PD.

Repeat Violation: No Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page) *Nimita Kapoor*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Nimita Kapoor - Admin* Date *10/29/15*

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The above plan of correction is approved as of 12-2-15 (Date)

The above plan of correction was approved by *[Signature]* (Initials)

Plan of correction implementation status as of 12-2-15 (Date)
 Fully Implemented
 Partially Implemented - Adequate Progress
 Partially Implemented - Inadequate Progress
 Not Implemented