



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via email to: [REDACTED]
MAILING DATE: December 4, 2018

Ms. Nimita Kapoor-Atiyeh
President
Saucon Valley Manor Inc.
1050 Main Street
Hellertown, Pennsylvania 18055

RE: Saucon Valley Manor
License #: 205810

Dear Ms. Kapoor-Atiyeh:

As a result of the Department's Bureau of Human Services Licensing inspection on October 17, 2018 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, appearing to read 'Bob Bisignani', written over a horizontal line.

Bob Bisignani
Human Services Licensing Director

Enclosure
Licensing Inspection Summary

Violation Report: 20581 - 10/17/2018 - Bomberger, Cybil

PCH Name: SAUCON VALLEY MANOR

1. REGULATION 55 Pa.Code §2600

2600.42(b) - A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

2a. DESCRIPTION OF VIOLATION

On 09/24/2018 while staff person A was providing personal care to resident #1, resident became combative and struck staff person A on the face. In response, staff person A hit resident #1 back on the cheek. Residents shall not be abused in any way.

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 facts or of the correction of the conclusion set forth on the License Inspection Summary. This plan of correction is prepared and submitted to meet the requirements under the state law. The Personal Care Home reserves any and all applicable rights to appeal pursuant to 55 Pa. Code §20 2et. Seq and §2600.263.

THE PERSONAL CARE HOME STRONGLY DISAGREES WITH THIS VIOLATION AS THIS WAS A SELF - REPORTED INCIDENT IN WHICH STAFF MEMBER A WAS IMMEDIATELY TERMINATED AFTER COMING DIRECTLY TO HIS/ HER SUPERVISOR INFORMING THEM OF THE INCIDENT. MOST IMPORTANTLY RESIDENT #1 SUSTAINED NO INJURIES AND FOLLOWED UP WITH THE PRIMARY CARE PHYSICIAN ON 9/25/18. PERSONAL CARE HOME FOLLOWED ALL POLICIES AND PROCEDURES AND ACTED IMMEDIATELY. THIS WAS ALSO NOTED BY THE LICENSING REPS ON SITE ON 10/17/18 THAT THERE WERE NO ADDITIONAL ACTIONS THAT THE HOME COULD'VE TAKEN AS EVERYTHING WAS HANDLED QUICKLY AND PROPERLY.

TO ENSURE CONTINUED COMPLIANCE PERSONAL CARE HOME WILL CONTINUE WITH ALL MANDATORY TRAINING INCLUDING MANDATORY ACT 13 REPORTING AND DE-ESCALATION TECHNIQUES. THIS WILL BE DONE FOR ALL NEW EMPLOYEES AT HIRE AND WILL ALSO CONTINUE IN OUR ANNUAL TRAINING PLAN WHERE WE HOLD MONTHLY TRAININGS FOR ALL CURRENT EMPLOYEES. THIS WILL BE OVERSEEN BY HUMAN RESOURCES AND ADMINISTRATION.

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 - Atiyeh
Co-Admin, President

Date

11/20/18

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of

11/26/18
(Date)

Plan of correction implementation status as of

11/26/18
(Date)

The above plan of correction was approved by

B.B.
(Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented