



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**Sent via email to: natiyeh@yahoo.com**  
**MAILING DATE: May 8, 2019**

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 January 15, 2019 of the above facility, the citations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report 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  
Human Services Licensing Supervisor

Enclosure  
Violation Report

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

<b>PCH Name:</b> SAUCON VALLEY MANOR		<b>License Number:</b> 20581
<b>Address:</b> 1050 MAIN STREET, HELLERTOWN, PA 18055		<b>County:</b> Northampton
<b>Administrator:</b> Nimita Kapoor-Atiyeh		<b>Region:</b> NORTHEAST
<b>Legal Entity Name:</b> SAUCON VALLEY MANOR INC		
<b>Legal Entity Address:</b> 1050 MAIN STREET, HELLERTOWN, PA 18055		
<b>Certificate(s) of Occupancy</b> C-2 LP 08/16/2004 L&I		
<b>Staffing Hours</b>		
<b>Resident Support:</b> 0	<b>Total Daily Staff:</b> 316	<b>Waking Staff:</b> 237
<b>Type of Inspection:</b> Partial	<b>BHA Docket Number:</b>	<b>Notice:</b> Unannounced
<b>Reason(s) for Inspection(s)</b> Incident		
<b>On-Site Inspections Dates and Department Representatives On-Site</b> 01/15/2019: Novak, Ryan; DeVries, Kristin		
<b>Off-Site Inspection Dates and Inspectors, if Applicable</b>		
<b>Other Details</b>		
<b>Partial or Full Triggers:</b>		<b>Random Indicators:</b>
<b>Resident Demographic Data as of Inspection Dates</b>		
<b>Licensed Capacity:</b> 268 <b>Number of Residents Served:</b> 201 <b>Secured Dementia Care Unit in Home:</b> Yes <b>Area:</b> n/a <b>Secured Dementia Unit Capacity, if Applicable:</b> 100 <b>Number of Residents Served in Secured Dementia Care Unit, if applicable:</b> 79 <b>Number of Current Hospice Residents:</b> 14 <b>Number of Hospice Residents in past year:</b> n/a		<b>Number of Residents who:</b> <b>Receive Supplemental Security Income:</b> 0 <b>Are 60 Years of Age or Older:</b> 197 <b>Have Mental Illness:</b> 2 <b>Have an Intellectual Disability:</b> 0 <b>Have a Mobility Need:</b> 115 <b>Have a Physical Disability:</b> 1

Violation Report: 20581 - 01/15/2019 - Novak, Ryan  
 PCH Name: SAUCON VALLEY MANOR

**1. REGULATION 55 Pa.Code §2600**

2600.227(d) - Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services.

**2a. DESCRIPTION OF VIOLATION**

On 10/30/18, 12/19/18, 12/24/18 Resident #1 was found next to the bed and reported the resident hit the head and was sent out to the ER. The RASP dated 10/14/18 was not updated regarding the falling and how the home was going to meet the residents needs.

**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 pursuant to 55 Pa. Code §55 Pa. Code 20 et seq. and 2600.263.

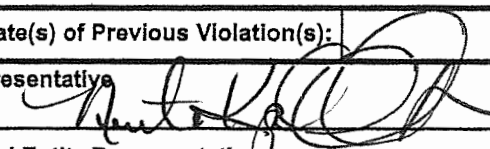
Please note that measures were put into place by the home to ensure that the home was able to continue to meet Resident #1's care needs including more frequent checks on Resident #1 as well as care conference with Resident #1's family to discuss current care needs as well as future care needs. Facility and family were in agreement to move Resident #1 to a higher level of care within the facility as well as adding additional medical equipment to assist Resident #1 when attempting to get in and out of bed on his/her own. Facility also consulted with PT/OT to assess Resident #1's room for any suggestions or concerns of the placement of the furniture in Resident #1's room. Facility followed all procedures including obtaining updated medical evaluation based on Resident #1's current care needs.

Going forward to ensure continued compliance, residents RASP will be updated with plan of how to meet any resident's care needs for any resident with recurrent falls. This will include but is not limited to any care conferences with resident or family members in which current and future care needs of a resident are discussed. The resident's RASP will be updated as per the 2600 regulations and will be reviewed by Administration to ensure all necessary updates are documented in the resident's RASP weekly.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)



Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page)

Nimita Kapoor-Atiyeh, Co-Admin, President

Date 4/1/19

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

The above plan of correction is approved as of 4-17-19  
 (Date)

The above plan of correction was approved by AG  
 (Initials)

Plan of correction implementation status as of 4-17-19  
 (Date)

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