

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

November 20, 2023

[REDACTED], PRESIDENT
SAUCON VALLEY MANOR INC.
1050 MAIN STREET
HELLERTOWN,, PA, 18055

RE: SAUCON VALLEY MANOR
1050 MAIN STREET
HELLERTOWN, PA, 18055
LICENSE/COC#: 20581

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/07/2023 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: SAUCON VALLEY MANOR **License #:** 20581 **License Expiration:** 09/03/2024
Address: 1050 MAIN STREET, HELLERTOWN, PA 18055
County: NORTHAMPTON **Region:** NORTHEAST

Administrator

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

Legal Entity

Name: SAUCON VALLEY MANOR INC.
Address: 1050 MAIN STREET, HELLERTOWN,, PA, 18055
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 268 **Waking Staff:** 201

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint **Exit Conference Date:** 09/07/2023

Inspection Dates and Department Representative

09/07/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
License Capacity: 213 **Residents Served:** 155
Secured Dementia Care Unit
In Home: Yes **Area:** n/a **Capacity:** 100 **Residents Served:** 75
Hospice
Current Residents: 23
Number of Residents Who:
Receive Supplemental Security Income: 0 **Are 60 Years of Age or Older:** 155
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 0
Have Mobility Need: 113 **Have Physical Disability:** 1

Inspections / Reviews

09/07/2023 Partial
Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 10/08/2023

10/19/2023 - POC Submission
Submitted By: [REDACTED] **Date Submitted:** 11/16/2023
Reviewer: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 10/26/2023

Inspections / Reviews *(continued)*

10/31/2023 POC Submission

Submitted By: [REDACTED]

Date Submitted: 11/16/2023

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 11/06/2023

11/20/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 11/16/2023

Reviewer: [REDACTED]

Follow Up Type: Not Required

23a - Activities of Daily Living Assistance

1. Requirements

2600.

23.a. A home shall provide each resident with assistance with ADLs as indicated in the resident's assessment and support plan.

Description of Violation

According to Resident #1's Resident Assessment and Support Plan (RASP) dated [REDACTED] the resident requires an assist of 2 people for transferring with a hoier lift and assistance to complete toileting, ambulating and personal hygiene. Resident #1 reported that during the 11p-7a shift the staff are not responding to the call bell to assist the resident as identified in the RASP.

Repeat violation: 2/14/23

Plan of Correction

Accept ([REDACTED] - 10/31/2023)

To ensure continued compliance,

On 9/8/2023 The Personal Care Aide checked Resident #1's call bell to ensure it was working properly. On 9/8/23 The Personal Care Aide provided re-education to resident # 1 on how to use the call bell for assistance. This re-education was added to Resident #1's RASP. On [REDACTED] Administration and Nursing supervisor reviewed resident #1's RASP and assignment sheet with the 11-7 shift to re-educate the staff to refer to the RASP as well as the resident's assignment sheet to ensure that Mary's care needs are being met throughout the day.

Going forward to ensure continued compliance, RASP audits will be completed and RASP's will be reviewed for compliance by Administration and Nursing supervisor. This will be monitored and audits will continue through December 31, 2023.

In addition beginning 11-1-23 PCA'S will be responsible for ensuring that call bell's are working, and residents are properly using them on a daily basis while assisting residents with AM and PM care. This will be added to the resident's assignement sheet and will be overseen by the Nursing supervisor to ensure call bell's are being checked and working properly. If a call bell is not working, Administration will immediately notify maintenance to program a new call bell fot that resident.

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.

Licensee's Proposed Overall Completion Date:

Implemented ([REDACTED] - 11/17/2023)