

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

May 21, 2024

[REDACTED]
WHITEHALL MANOR, INC.
[REDACTED]

RE: WHITEHALL MANOR
1177 SIXTH STREET
WHITEHALL, PA, 18052
LICENSE/COC#: 21665

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/14/2024, 02/15/2024 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]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: *WHITEHALL MANOR* License #: *21665* License Expiration: *10/24/2024*

Address: *1177 SIXTH STREET, WHITEHALL, PA 18052*

County: *LEHIGH* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *WHITEHALL MANOR, INC.*

Address: [REDACTED]

Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-2 LP* Date: *05/19/2006* Issued By: *DLI*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *133* Waking Staff: *100*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:

Reason: *Complaint, Incident* Exit Conference Date: *02/15/2024*

Inspection Dates and Department Representative

02/14/2024 - On-Site: [REDACTED]

02/15/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *130* Residents Served: *100*

Secured Dementia Care Unit

In Home: *Yes* Area: *SDCU* Capacity: *20* Residents Served: *10*

Hospice

Current Residents: *4*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *100*

Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*

Have Mobility Need: *33* Have Physical Disability: *0*

Inspections / Reviews

02/14/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/18/2024*

04/01/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: *05/15/2024*

Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *04/08/2024*

Inspections / Reviews *(continued)*

04/15/2024 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/15/2024

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 05/15/2024

05/21/2024 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/15/2024

Reviewer: [REDACTED]

Follow-Up Type: Not Required

15a - Resident Abuse Report

1. Requirements

2600.

15.a. The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

Description of Violation

Resident [REDACTED] made an allegation of abuse regarding Direct care staff member A to Direct care staff member B at the 730am medication pass on [REDACTED]. The allegation of abuse was not reported to the local area agency on aging.

Plan of Correction

Directed [REDACTED] - 04/15/2024)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, Personal care home did not immediately report this allegation to Aging however immediate action was taken on [REDACTED] which Administrator of Personal Care Home immediately ensured that the resident was safe and began conducting internal investigation including speaking to resident and staff member involved in alleged allegation. Allegation which was founded unsubstantiated by both Area Agency on Aging and Department of Human Services. Inspectors from the Department as well as Aging were on site at Personal Care Home on [REDACTED] in which full reports were given to inspectors at that time. Furthermore, resident admitted to Administration and [REDACTED] that [REDACTED] was not telling the truth and that [REDACTED] statements were just to try to get a reduction in [REDACTED] rent. Report was sent to the department human services and an additional 3 interim reports were sent to the department as well.

Immediate solution is that going forward Administration will immediately report any allegations of abuse immediately to the Area Agency on Aging and the Department of Human Services prior to completing internal investigation to maintain ongoing compliance with immediately reporting suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.701—10225.707) and 6 Pa. Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes. Any and all allegations of suspected abuse will be immediately addressed by Administration and it will be the responsibility of Administration to ensure that Aging is notified of any allegation.

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.

Proposed Overall Completion Date: 04/10/2024

(Directed)

All staff, including the administrator, will receive training in abuse reporting and prevention from an outside source and at the home's expense. Documentation of this training will be kept for the Departments review upon request. In the future, Immediately and ongoing If any future allegations of abuse occur, the home will immediately take the following steps:

1. Suspend the staff person/staff persons involved or put a plan of supervision in place that is approved by the Department

15a - Resident Abuse Report (continued)

2. Report the alleged abuse to the Department
3. Report the alleged abuse to the local Area Agency on Aging
4. Report the alleged abuse to the resident's designated person, if any.

Directed Completion Date: 05/15/2024

Implemented [REDACTED] - 05/19/2024)

15c - Supervision

2. Requirements

2600.

15.c. The home shall immediately submit to the Department's personal care home regional office a plan of supervision or notice of suspension of the affected staff person.

Description of Violation

Resident [REDACTED] made an allegation of abuse regarding Direct care staff member A to Direct care staff member B at the 730am medication pass on [REDACTED]. The home did not immediately submit to the Department's personal care home regional office a plan of supervision or notice of suspension for Staff member A.

Plan of Correction

Directed [REDACTED] - 04/15/2024)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on [REDACTED] in which employee was informed that [REDACTED] was to not go into room unattended when assisting resident's roommate and employee was not to assist resident A with activities of daily living except in the event of an emergency or evacuation. Plan was discussed verbally with resident and administration and resident agreed to the plan and plan was put into place until investigation was completed. Furthermore, resident admitted to Administration and [REDACTED] that [REDACTED] was not telling the truth and that [REDACTED] statements were just to try to get a reduction in [REDACTED] rent.

Area Agency on Aging and Department of Human Services both found the allegations of abuse unsubstantiated. A revised reportable incident was sent to the Department outlining the plan of supervision and staff member was accompanied at all times in residents room.

To maintain ongoing compliance Administration will immediately submit to the Department's personal care home regional office a plan of supervision or notice of suspension of the affected staff person. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes. Administration along with Nursing supervisors will ensure that plan of supervision is immediately put into place and that Department is informed of such plan. Administration will ensure continued compliance with regulation 15c and Administration will monitor compliance to ensure plan of supervisions are submitted to the department as outlined in the regulation. Administration will ensure that above plan that was outlined is submitted to the department for their approval.

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15c - Supervision (continued)

seq. and 2600.263.

Proposed Overall Completion Date: 04/10/2024

(Directed)

Immediately and ongoing If any future allegations of abuse occur, the home will immediately take the following steps:

- 1. Suspend the staff person/staff persons involved or put a plan of supervision in place that is approved by the Department**
- 2. Report the alleged abuse to the Department**
- 3. Report the alleged abuse to the local Area Agency on Aging**
- 4. Report the alleged abuse to the resident's designated person, if any.**

Directed Completion Date: 04/10/2024

Implemented (████) - 05/19/2024)

16c - Written Incident Report

3. Requirements

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

Resident █████ made an allegation of abuse regarding Direct care staff member A to Direct care staff member B at the 730am medication pass on █████. The allegation of abuse was not reported Department until █████ at approximately 2:30pm.

Plan of Correction

Directed (████) - 04/15/2024)

In response to the violation on █████ by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on █████ which Administrator of Personal Care Home immediately conducted internal investigation including speaking to resident and staff member involved in alleged allegation which was founded unsubstantiated by both Area Agency on Aging and Department of Human Services. Inspectors from the Department as well as Aging were on site at Personal Care Home on █████. Administration did send initial incident report to department which stated to have someone from the department contact personal care home because of the complexity of the alleged allegation. It appears that Department did not receive the initial incident report that was sent to the department and it was resent while inspectors were on site at the personal care home. Furthermore, resident admitted to Administration and █████ that █████ was not telling the truth and that █████ statements were just to try to get a reduction in █████ rent.

To enhance the currently compliant operations, Administration will immediately report any allegations of abuse immediately to Department of Human Services and complete a written incident report prior to completing internal investigation to maintain ongoing compliance with immediately reporting suspected abuse of a resident served in the home in accordance with the Older Adult Protective Services Act (35 P. S. § 10225.701—10225.707) and 6 Pa.

16c - Written Incident Report (continued)

Code § 15.21—15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes. It will be the responsibility of Administration to ensure all allegations of suspected abuse be called into complaint hotline within 24 hours and reported to the Department via reportable incident rform also within 24 hours of the alleged allegation.

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.

Proposed Overall Completion Date: 04/10/2024

(Directed)

The Administrator will immediately and ongoing train all staff in reportable incidents and conditions, as well as the homes internal policy on who is responsible for reporting the incidents to the Department as required including weekends and holidays. The home will keep documentation of the training for review upon the Departments request. All future incidents will be reported as required.

Directed Completion Date: 04/30/2024

Implemented [REDACTED] 05/19/2024)

227d - Support Plan Medical/Dental

4. Requirements

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. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

Resident [REDACTED] Resident Assessment and Support Plan is not updated with the behaviors being displayed since December of 2023, which includes making multiple attempts to reduce the monthly rate.

Plan of Correction

Accept [REDACTED] - 04/11/2024)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken which the Residents RASP was updated and Administration did review all information with both the Area Agency on Aging anf the Department of Human Services while on site at Personal Care Home. Futhermore, resident admitted to Administration and [REDACTED] that [REDACTED] was not telling the truth and that [REDACTED] statements were just to try to get a reduction in [REDACTED] rent.

To enhance the currently compliant operations, Addministration will notify RASP coordinator of any information that would need to be included in the resident's RASP regarding anything other than medical information in which the care givers will need to perform the residents activities of daily living.

227d - Support Plan Medical/Dental (continued)

to maintain ongoing compliance Rasp coordinator will be responsible for documenting 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. This requirement does not require a home to pay for the cost of these medical and behavioral care services. This will be overseen by Administration to ensure updates other than medical information have been included and updated in the residents RASP. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes. This will be overseen by Administration to ensure continued compliance. Rasp's will be audited on weekly basis by RASP coordinator, Administration and Nursing.

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: 04/10/2024

Implemented 05/21/2024)