

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

August 12, 2024

[REDACTED], PRESIDENT  
WHITEHALL MANOR, INC.  
1177 SIXTH STREET  
WHITEHALL, PA, 18052

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

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/12/2024 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.

[REDACTED]

Human Services Licensing Supervisor

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:** 1177 SIXTH STREET, WHITEHALL, PA, 18052  
**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:** 137 **Waking Staff:** 103

**Inspection Information**

**Type:** Partial **Notice:** Unannounced **BHA Docket #:**  
**Reason:** Incident **Exit Conference Date:** 06/12/2024

**Inspection Dates and Department Representative**

06/12/2024 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

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

**Secured Dementia Care Unit**

**In Home:** No **Area:** **Capacity:** **Residents Served:**

**Hospice**

**Current Residents:** 37

**Number of Residents Who:**

**Receive Supplemental Security Income:** 0 **Are 60 Years of Age or Older:** 90  
**Diagnosed with Mental Illness:** 0 **Diagnosed with Intellectual Disability:** 0  
**Have Mobility Need:** 37 **Have Physical Disability:** 0

**Inspections / Reviews**

**06/12/2024 Partial**

**Lead Inspector:** [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 07/13/2024

**07/19/2024 - POC Submission**

**Submitted By:** [REDACTED] **Date Submitted:** 08/09/2024  
**Reviewer:** [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 07/26/2024

Inspections / Reviews *(continued)*

08/01/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 08/09/2024

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 08/06/2024

08/12/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/09/2024

Reviewer: [REDACTED]

Follow Up Type: Not Required

## 21 - Off-Premises Activity

## 1. Requirements

2600.

21. Offsite Services - If services or activities are provided by the home at a location other than the premises, the home shall ensure that the resident's support plans are followed and that resident health and safety are met.

## Description of Violation

Resident # 1's Resident Assessment and Support Plan (RASP) dated [REDACTED] indicates [REDACTED] needs supervision in unfamiliar places and outside the facility. [REDACTED] was taken on a trip with other residents to Wind Creek Casino on 5-1-24. The resident wandered away from the group, and was found at the bar in the casino.

## Plan of Correction

Accept ([REDACTED] - 08/01/2024)

Immediate action was taken on 6/13/24 which Administration met with activities and informed staff that prior to taking a resident on an outside outing that the resident's RASP will be reviewed to see level of supervision.

To ensure continued compliance Administration, Activities and Nursing will ensure that all residents going to outside activities are properly supervised as indicated in their RASP. In addition an additional direct care staff person will also attend any outside outing scheduled by the facility so resident's can be supervised at all times. This will be overseen by Administration and this will be done at each scheduled outside trip. This has been implemented as of 7/24/24.

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: 07/24/2024

Implemented ([REDACTED] - 08/12/2024)

## 42b - Abuse

## 2. Requirements

2600.

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

## Description of Violation

Resident #2's debit card was taken by former employee A, who made withdrawals on [REDACTED] [REDACTED] with a total amount of [REDACTED].

## Plan of Correction

Accept ([REDACTED] - 08/01/2024)

When this came to the attention of Administration on [REDACTED] immediate action was taken in which Employee A was immediately terminated. Administration notified Aging and the Department of incident on 5/16/24 Administration worked with the bank and police department and all resident funds were restored back to the resident by 5/20/24.

To ensure continued compliance, Administration and HR reviewed abuse and neglect regulations with all employees during the June monthly all staff training. Administration, Nursing and HR will ensure that residents are safely securing their items and this will be done on a weekly basis. Personal Care Home will continue to remind staff on

42b Abuse (continued)

of regulaton 42b. This will be overseen by Administration to ensure on going compliance and this was fully implemented on 7/24/24

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: 07/24/2024

Implemented ( ) - 08/12/2024)

42c - Treatment of Residents

3. Requirements

2600.

42.c. A resident shall be treated with dignity and respect.

Description of Violation

Staff B stated to Resident #1 to, "get in the damn car," when Resident #1 was intoxicated and causing a scene at a restaurant on a trip.

Plan of Correction

Accept ( ) - 08/01/2024)

Immediate action was taken and Staff person B was addressed by Administration on [redacted] regarding respect and dignity and how to properly address residents. This was re reviewed with Staff person B on [redacted]. To ensure continued compliance dignity and respect of residents was reviewed with staff at the June all staff training. Administration, HR and Nursing supervisors will continue to review with staff on treating residents with dignity and respect on a weekly basis and at time of orientaton. This will be overseen by Administration to ensure ongoing compliance with a completion date of 7/24/24.

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: 07/24/2024

Implemented ( ) - 08/12/2024)