

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

September 26, 2024

CAROL BLAZO, ADMINISTRATOR
SACRED HEART ASSISTED LIVING BY SAUCON CREEK LLC
3910 ADLER PLACE, SUITE 100
BETHLEHEM, PA, 18017

RE: SACRED HEART SENIOR LIVING BY
SAUCON CREEK
4851 SAUCON CREEK ROAD
CENTER VALLEY, PA, 18034
LICENSE/COC#: 21675

Dear Carol Blazo,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/15/2024 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,
Ryan Yankowy
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: SACRED HEART SENIOR LIVING BY SAUCON CREEK License #: 21675 License Expiration: 12/17/2024
 Address: 4851 SAUCON CREEK ROAD, CENTER VALLEY, PA 18034
 County: LEHIGH Region: NORTHEAST

Administrator

Name: Carol Blazo Phone: 6108142700 Email: cblazo@shfamily.org

Legal Entity

Name: SACRED HEART ASSISTED LIVING BY SAUCON CREEK LLC
 Address: 3910 ADLER PLACE, SUITE 100, BETHLEHEM, PA, 18017
 Phone: 6108142700 Email: AMECKLER@SHFAMILY.ORG

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 54 Waking Staff: 41

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Incident Exit Conference Date: 08/15/2024

Inspection Dates and Department Representative

08/15/2024 - On-Site: Erin Diehl

Resident Demographic Data as of Inspection Dates

General Information			
License Capacity: 85	Residents Served: 40		
Secured Dementia Care Unit			
In Home: No	Area:	Capacity:	Residents Served:
Hospice			
Current Residents: 5			
Number of Residents Who:			
Receive Supplemental Security Income: 0	Are 60 Years of Age or Older: 40		
Diagnosed with Mental Illness: 0	Diagnosed with Intellectual Disability: 0		
Have Mobility Need: 14	Have Physical Disability: 0		

Inspections / Reviews

08/15/2024 - Partial

Lead Inspector: Erin Diehl Follow-Up Type: POC Submission Follow-Up Date: 09/16/2024

09/19/2024 - POC Submission

Submitted By: Carol Blazo Date Submitted: 09/19/2024
 Reviewer: Ryan Yankowy Follow-Up Type: Document Submission Follow-Up Date: 09/23/2024

Inspections / Reviews (*continued*)

09/26/2024 - Document Submission

Submitted By: *Carol Blazo*

Date Submitted: *09/19/2024*

Reviewer: *Ryan Yankowy*

Follow-Up Type: *Not Required*

227e - Self Administer Medication

1. Requirements

2600.

227.e. The resident’s support plan must document the ability of the resident to self-administer medications or the need for medication reminders or medication administration.

Description of Violation

Resident #1's Document of Medical Evaluation (DME) dated 5-1-24 indicates resident cannot self-administer medications. Resident Assessment and Support Plan (RASP) dated 6-14-23 also indicates resident cannot self-administer medications on page 5. On page 6, there are places on the RASP that indicate the resident will self-administer their own medications, showing an inconsistency.

Plan of Correction

Accept (RY - 09/19/2024)

Sacred Heart Senior Living by Saucon Creek
PLAN OF CORRECTION FOR 2600.277.(e)

Violation: 2600.277.(e) The resident’s support plan must document the ability of the resident to self-administer medications or the need for medication reminders or medication administration.

Description: Resident #1’s Document of Medical Evaluation (DME) dated 5/1/24 indicated resident cannot self-administer medications. Resident Assessment and Support Plan (RASP) dated 6/14/23 also indicated resident cannot self-administer medications on page 5. On page 6, there are places on the RASP that indicate the resident will self-administer their own medications, showing an inconsistency.

IMMEDIATE PLAN OF CORRECTION AT THE TIME OF INSPECTION: The RASP document page 6 was corrected to show Resident #1 to show resident cannot self-administer medications based on the correct information dated on DME 5/1/24 and RASP 6/14/23.

PLAN OF CORRECTION:

1. The DME and RASP must be reviewed for the same name, date of birth, diagnoses and if the resident CAN or CANNOT self-administer medication. The DME and RASP must show the same information to avoid any inconsistency.
2. Any changes to resident's ability from self-administer to cannot self-administer will be documented immediately in both the DME and RASP.
3. Any individual working on a resident file, will only work on one file (DME and RASP) at a time to ensure documentation is for the correct resident at the time of review.
4. A double check system to be added where two individuals will review resident file paperwork to ensure paperwork is documented correctly on the DME and RASP. Director of Nursing, Admissions Director and/or Administrator will be designees to perform the double check.

The following have reviewed and understand the Plan of Correction for Required Paperwork for resident’s DMEs and RASPs for resident files and the review procedure to ensure the correct paperwork is documented correctly on DME’s and RASP’s to maintain consistency and will make sure to check monthly to maintain compliance.

Administrator: Carol Blazo, LPN

Signature: _____ Date: _____

Director of Nursing: Jolyn Church, LPN

227e - Self Administer Medication (continued)

Signature: _____ Date: _____

Admissions Director: Melody Berger

Signature: _____ Date: _____

If this POC is approved, the above designees will review and sign off on the POC.

See attached.

Licensee's Proposed Overall Completion Date: 09/09/2024

Implemented (RY - 09/26/2024)