

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

October 20, 2025

WILLIAM'S MANOR LLC, LEGAL ENTITY
WILLIAM'S MANOR LLC.
164 BARON ROAD
WIND GAP, PA, 18091

RE: WILLIAM'S MANOR
164 BARON ROAD
WIND GAP, PA, 18091
LICENSE/COC#: 20731

Dear WILLIAM'S MANOR LLC,

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/17/2025 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,

A large black rectangular redaction box covering the signature area.

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: WILLIAM'S MANOR License #: 20731 License Expiration: 10/29/2025
 Address: 164 BARON ROAD, WIND GAP, PA 18091
 County: NORTHAMPTON Region: NORTHEAST

Administrator

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

Legal Entity

Name: WILLIAM'S MANOR LLC.
 Address: 164 BARON ROAD, WIND GAP, PA, 18091
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-3 SP Date: 03/29/1989 Issued By: L&I
 Type: R-4 Date: 07/01/2010 Issued By: L & I

Staffing Hours

Resident Support Staff: 2 Total Daily Staff: 5 Waking Staff: 4

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
 Reason: Renewal Exit Conference Date: 09/17/2025

Inspection Dates and Department Representative

09/17/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 8 Residents Served: 3

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 3
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

09/17/2025 - Full

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 10/11/2025

10/09/2025 - POC Submission

Submitted By: [REDACTED] Date Submitted: 10/19/2025
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 10/16/2025

Inspections / Reviews *(continued)*

10/16/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/19/2025

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 10/23/2025

10/20/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/19/2025

Reviewer: [REDACTED]

Follow-Up Type: Not Required

85b - Infestation

1. Requirements

2600.
85.b. There may be no evidence of infestation of insects or rodents in the home.

Description of Violation

At 9:00 a.m., located near the home's front walkway entrance, numerous hornets' were coming out from under the homes siding.

Plan of Correction **Accept ([REDACTED] - 10/16/2025)**

Greenix, a pest-control service, is contracted with Williams Manor to ensure the home is free and clear of insects and rodents in and around the property. Greenix performed its latest service on September 30 (see attachment) and will return for another treatment on October 9.

All staff have been trained regarding awareness and recognition of any infestation around the home. Proof of training with staff acknowledgment is attached.

Licensee's Proposed Overall Completion Date: 10/14/2025

Implemented ([REDACTED] - 10/20/2025)

124 - Notice to Fire Department

2. Requirements

2600.
124. The home shall notify the local fire department in writing of the address of the home, location of the bedrooms and the assistance needed to evacuate in an emergency. Documentation of notification shall be kept.

Description of Violation

The notice to the local fire department dated 8/31/19 states the current census for the home was 4 when the census on 9/17/25 was 3.

Plan of Correction **Accept ([REDACTED] - 10/09/2025)**

The Bushkill Township Fire Department has received and acknowledged a new letter citing the address of the home and residents' assistance needs in the event of an emergency. It likewise has a layout of Williams Manor's residential rooms.

Documentation is attached and will be retained in the William's Manor Emergency Preparedness Book.

Licensee's Proposed Overall Completion Date: 10/09/2025

Implemented ([REDACTED] - 10/20/2025)

125a - Combustible Storage

3. Requirements

2600.
125.a. Combustible and flammable materials may not be located near heat sources or hot water heaters.

Description of Violation

At 9:15 a.m., a sock, a dry erase sponge, and plastic glove were resting behind the dryer in close proximity to the exhaust vent.

125a - Combustible Storage (continued)

Plan of Correction**Accept (█ - 10/16/2025)**

An item has been added to the list of staff responsibilities, ensuring weekly inspection of the areas around and behind dryer units are free and clear of any combustible/flammable materials. Staff is required to acknowledge inspections on a weekly basis.

Corrective measures to the specific instance were taken at the time of inspection on September 17, 2025.

Weekly inspection requirements were introduced on October 9, upon receipt of post-inspection citations.

Licensee's Proposed Overall Completion Date: 10/14/2025

Implemented (█ - 10/20/2025)

141a 1-10 Medical Evaluation Information

4. Requirements

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission. The evaluation must include the following:

1. A general physical examination by a physician, physician's assistant or nurse practitioner.
2. Medical diagnosis including physical or mental disabilities of the resident, if any.
3. Medical information pertinent to diagnosis and treatment in case of an emergency.
4. Special health or dietary needs of the resident.
5. Allergies.
6. Immunization history.
7. Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications.
8. Body positioning and movement stimulation for residents, if appropriate.
9. Health status.
10. Mobility assessment, updated annually or at the Department's request.

Description of Violation

Resident 1's initial medical evaluation was completed on █. The medical evaluation was missing a required element of the evaluation, that the resident's needs can be met safely by the Personal Care Home.

Plan of Correction**Accept (█ - 10/16/2025)**

All new and annual care plans will be filled out by the administrator/nurse and checked/verified/confirmed by a PCA employee to ensure that the care plan is complete and accurate.

DME for Resident 1 was updated and audits on all DMEs for current residents was performed on September 18, the day after the annual inspection.

Licensee's Proposed Overall Completion Date: 10/14/2025

Implemented (█ - 10/20/2025)

187a - Medication Record

5. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

187a - Medication Record (*continued*)

1. Resident's name.
2. Drug allergies.
3. Name of medication.
4. Strength.
5. Dosage form.
6. Dose.
7. Route of administration.
8. Frequency of administration.
9. Administration times.
10. Duration of therapy, if applicable.
11. Special precautions, if applicable.
12. Diagnosis or purpose for the medication, including pro re nata (PRN).
13. Date and time of medication administration.
14. Name and initials of the staff person administering the medication.

Description of Violation

Resident 2's medication record did not include a current list of medications. Resident 2's prescription [REDACTED] was not listed on the resident's MAR.

The pharmacy label for resident 3's [REDACTED]. The resident's MAR says [REDACTED]. The MAR does not indicate the same dosage.

Plan of Correction

Accept ([REDACTED] - 10/16/2025)

On a new monthly basis, 3 employees, including the nurse/administrator, will sign and check all MARs against all medications in the cart to ensure such medications match what appears on the MAR.

Resident 2 & 3's MARs were updated with the correct information on September 17, 2025, the day of the annual inspection.

Licensee's Proposed Overall Completion Date: 10/14/2025

Implemented ([REDACTED] - 10/20/2025)