

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

February 3, 2026

[REDACTED]  
One Solebury Properties, LP  
[REDACTED]  
[REDACTED]

RE: The Birches at New Hope  
6554 LOWER YORK ROAD  
New Hope , PA, 18938  
LICENSE/COC#: 15419

[REDACTED],  
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 12/18/2025 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,  
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: *The Birches at New Hope* License #: 15419 License Expiration:

Address: *6554 LOWER YORK ROAD, New Hope, PA 18938*

County: *BUCKS* Region: *SOUTHEAST*

**Administrator**

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

**Legal Entity**

Name: *One Solebury Properties, LP*

Address: [REDACTED]

Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *I-1* Date: *08/19/2025* Issued By: *Solebury Township*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *6* Waking Staff: *5*

**Inspection Information**

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

Reason: *New* Exit Conference Date: *12/18/2025*

**Inspection Dates and Department Representative**

12/18/2025 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: Residents Served: *3*

**Secured Dementia Care Unit**

In Home: *Yes* Area: *Daybreak* Capacity: *45* Residents Served: *3*

**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: *3* Have Physical Disability: *0*

**Inspections / Reviews**

12/18/2025 Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *01/22/2026*

01/16/2026 - POC Submission

Submitted By: [REDACTED] Date Submitted: *01/16/2026*

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *01/19/2026*

Inspections / Reviews *(continued)*

02/03/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 01/16/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

101j3 - Bed/Linens/Pillows/Blankets

1. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

3. Pillows, bed linens and blankets that are clean and in good repair.

Description of Violation

On [redacted], the beds in resident rooms [redacted] and [redacted] did not have linens.

Plan of Correction

Accept [redacted] 01/16/2026)

Description of Violation On [redacted] the beds in resident rooms [redacted] and [redacted] did not have linens.

Apartments [redacted] and [redacted], were set up as model apartments. The beds were noted to be without bedding at the time of inspection.

Immediate corrective Action: On 12/18/2025, at the time of inspection, the beds were immediately made with sheets, blankets, and pillows with cases by New Hope staff, using the linen supply in house.

The Maintenance Director and housekeeping team will be educated by the Executive Director by 1/16/2026 about the requirements.

Ongoing Quality Assurance Actions: The Maintenance Director will check the bed for linens prior to a resident moving in as a part of the move in apartment check list beginning 1/16/2026. Ongoing, Housekeeping will monitor bed linens during scheduled weekly cleaning of apartments beginning 1/16/2026. Ongoing compliance will be reviewed by the Executive Director during scheduled quarterly QA reviews beginning January 14, 2026

Licensee's Proposed Overall Completion Date: 01/15/2026

Implemented [redacted] - 01/22/2026)

102h - Toilet Paper

2. Requirements

2600.

102.h. Toilet paper shall be provided for every toilet.

Description of Violation

On [redacted] there was no toilet paper for the toilet in resident rooms [redacted] and [redacted]

Plan of Correction

Accept [redacted] - 01/16/2026)

Description of Violation On [redacted] there was no toilet paper for the toilet in resident rooms [redacted], [redacted] and [redacted]

Apartments [redacted] and [redacted] were set up as model apartments. The bathrooms were noted to be without toilet paper at the time of inspection.

Immediate corrective Action: On 12/18/2025, at the time of inspection, The Maintenance Director added toilet paper to each apartment, using the supply in house.

The Maintenance Director, housekeeping team, and caregivers will be educated by the Executive Director by 1/16/2026 about the requirements.

Ongoing quality Assurance Actions: Housekeeping will monitor bathrooms to ensure there is an adequate supply of Toilet paper during scheduled weekly cleaning of apartments beginning 1/16/2026. Additionally, care staff will monitor apartments daily while caring for the residents to ensure each bathroom has an adequate supply of toilet paper beginning 1/16/2026. Ongoing compliance will be reviewed by the Executive Director during scheduled quarterly QA reviews beginning January 14th, 2026

102h Toilet Paper (continued)

Licensee's Proposed Overall Completion Date: 01/15/2026

Implemented [REDACTED] 01/22/2026)