

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

May 20, 2026

[REDACTED]
SAUCON VALLEY MANOR INC.
[REDACTED]
[REDACTED]

RE: SAUCON VALLEY MANOR
1050 MAIN STREET
HELLERTOWN, PA, 18055
LICENSE/COC#: 20581

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/01/2026 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: SAUCON VALLEY MANOR **License #:** 20581 **License Expiration:** 09/27/2026
Address: 1050 MAIN STREET, HELLERTOWN, PA 18055
County: NORTHAMPTON **Region:** NORTHEAST

Administrator

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

Legal Entity

Name: SAUCON VALLEY MANOR INC.
Address: [REDACTED]
Phone: [REDACTED] **Email:** [REDACTED]

Certificate(s) of Occupancy

Type: I-2 **Date:** 11/13/2005 **Issued By:** Dept of L&I

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 301 **Waking Staff:** 226

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint **Exit Conference Date:** 05/01/2026

Inspection Dates and Department Representative

05/01/2026 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information			
License Capacity: 201	Residents Served: 191		
Secured Dementia Care Unit			
In Home: Yes	Area: Memory Care	Capacity: 100	Residents Served: 63
Hospice			
Current Residents: 34			
Number of Residents Who:			
Receive Supplemental Security Income: 0	Are 60 Years of Age or Older: 190		
Diagnosed with Mental Illness: 0	Diagnosed with Intellectual Disability: 0		
Have Mobility Need: 110	Have Physical Disability: 2		

Inspections / Reviews

05/01/2026 Partial
Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 05/25/2026

Inspections / Reviews (*continued*)

05/20/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/20/2026

Reviewer: [REDACTED]

Follow Up Type: *Bypass Document
Submission*

05/20/2026 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/20/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

227g -Support Plan Signatures

1. Requirements

2600.

227.g. Individuals who participate in the development of the support plan shall sign and date the support plan.

Description of Violation

The Resident Assessment and Support Plan for Resident [REDACTED] dated [REDACTED] was not signed by the resident or notated that the resident was unable or declined to sign or participate in the support plan.

Repeated [REDACTED]

Plan of Correction

Accept [REDACTED] - 05/20/2026)

Please note that Resident [REDACTED] is no longer residing at the facility. This violation resulted from a documentation oversight. Resident [REDACTED] support plan was completed; however, [REDACTED] signature was not obtained prior to discharge. Because Resident # [REDACTED] is no longer at the facility, obtaining [REDACTED] missing signature is not possible. A notation has been added to Resident [REDACTED]'s support plan indicating that Resident [REDACTED] was discharged and therefore unavailable to sign the support plan.

Immediate action was taken and a notation was entered on Resident # [REDACTED] support plan documenting that the resident was discharged from the facility and that the signature could not be obtained. No further immediate corrective action is possible due to Resident [REDACTED] being discharged from the facility.

To ensure continued compliance with 2600.227(g), the facility has implemented a signature verification process:

- A signature verification checklist has been created to ensure all required signatures are obtained at the time of support plan review.*
- The unit clerk will verify that all signatures are present before any support plan is filed.*
- A secondary administrative review has been added: each week, the unit clerk will forward copies of all newly completed support plans to Administration.*
- The Administrator will review each support plan to confirm that all required information and signatures have been completed prior to final filing and the Administrator will complete the checklist weekly verifying that all information is accurate and all signatures have been obtained.*

In addition, on May 27, 2026, all staff responsible for assessments and support plan development will be retrained on:

- Proper documentation procedures*
- Signature verification requirements*
- Use of the new support plan checklist*

It will be the responsibility of the unit clerk to review all newly completed support plans within 48 hours to ensure all required signatures are present. Additionally, Administration will be responsible for conducting a weekly review of all support plans submitted by the Unit Clerk verifying that all documentation and signatures are complete (please see attached audit sheet that was created). The unit clerk and Administrator are responsible for implementing and maintaining this corrective action moving forward.

Licensee's Proposed Overall Completion Date: 05/27/2026

Implemented ([REDACTED] - 05/20/2026)