



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail to: [REDACTED]

MAILING DATE: November 16, 2018

Ms. Tracy Patton
Executive Director
Moravian Village of Bethlehem
526 Wood Street
Bethlehem, Pennsylvania 18018

RE: Moravian Village II of Bethlehem
License #: 215690

Dear Ms. Patton:

As a result of the Department's Bureau of Human Services Licensing inspection on September 24, 2018 of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Anne Graziano".

Anne Graziano
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report: 21569 - 09/24/2018 - Harvey, Jason
PCH Name: MORAVIAN VILLAGE II OF BETHLEHEM

1. REGULATION 55 Pa.Code §2600

2600.15(a) - The home shall immediately report suspected abuse of a resident served in the home in accordance with the Older Adults Protective Services Act (35 P.S. Sections 10225.701 - 10225.707) and 6 Pa. Code Sections 15.21 - 15.27 (relating to reporting suspected abuse) and comply with the requirements regarding restrictions on staff persons.

2a. DESCRIPTION OF VIOLATION

The home did not notify the local Area Agency on Aging on 6/22/18 of an allegation of financial exploitation by staff A and resident #1.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

Notification to Northampton County Area Agency on Aging (NC AAA) was completed on 9/24/18 and a report was filed with [redacted]. On 10/3/18, PC Admin spoke with [redacted] from NC AAA. She had talked with Resident #1. No further information was needed from Resident #1 and a phone number for record for Staff A, was requested and given. No further information or action requested from PC Admin.

PC Admin will ensure that should any future abuse allegations be made for PC residents, notification will be made to NC AAA. PC administrators will monitor and assure ongoing compliance. Inservice will also take place with staff discussing the value of reporting any information received, prevention of all types of abuse, including exploitation and the ramifications of all kinds of abuse. Although Abuse Training is conducted during annual education as well as Personal Care Aides direct training, further ~~training~~ ^{inservice} will be conducted by 11/30/18.*

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) Kristel Seagraves, PC Admin

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Kristel Seagraves, PC Admin **Date** 10/24/18

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The above plan of correction is approved as of 11-15-18 (Date)

The above plan of correction was approved by AG (Initials)

Plan of correction implementation status as of 11-15-18 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented