

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

March 8, 2023

[REDACTED]  
ALEXANDRIA MANOR OF ALLENTOWN INC  
[REDACTED]

RE: ALEXANDRIA MANOR II  
313 S. WALNUT ST.  
BATH, PA, 18014  
LICENSE/COC#: 20526

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 02/09/2023, 02/21/2023, 02/28/2023, 03/01/2023 of the above facility, no regulatory citations have been identified as a result of this inspection.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,  
[REDACTED]

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: *ALEXANDRIA MANOR II* License #: *20526* License Expiration: *05/07/2023*  
 Address: *313 S. WALNUT ST., BATH, PA 18014*  
 County: *NORTHAMPTON* Region: *NORTHEAST*

**Administrator**

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

**Legal Entity**

Name: *ALEXANDRIA MANOR OF ALLENTOWN INC*  
 Address: *7 SOUTH NEW STREET, NAZARETH, PA, 18064*  
 Phone: [Redacted] Email: [Redacted]

**Certificate(s) of Occupancy**

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *41* Waking Staff: *31*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Complaint* Exit Conference Date: *03/01/2023*

**Inspection Dates and Department Representative**

02/09/2023 - On-Site: [Redacted]  
 02/21/2023 - Off-Site: [Redacted]  
 02/28/2023 - Off-Site: [Redacted]  
 03/01/2023 - Off-Site: [Redacted]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *78* Residents Served: *36*

**Secured Dementia Care Unit**  
 In Home: *No* Area: Capacity: Residents Served:

**Hospice**  
 Current Residents: *3*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *36*  
 Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *1*  
 Have Mobility Need: *5* Have Physical Disability: *1*

**Inspections / Reviews**

02/09/2023 - Partial  
 Lead Inspector: [Redacted] Follow-Up Type: *Not Required*

NO DEFICIENCIES FOUND