

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

October 2, 2023

[REDACTED]  
BETHLEHEM MANOR SENIOR LIVING LLC  
815 PENNSYLVANIA AVENUE  
BETHLEHEM, PA, 18018

RE: BETHLEHEM MANOR  
815 PENNSYLVANIA AVENUE  
BETHLEHEM, PA, 18018  
LICENSE/COC#: 22684

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 09/14/2023 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]  
Acting Human Services Licensing Supervisor

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: *BETHLEHEM MANOR* License #: *22684* License Expiration: *05/24/2024*  
 Address: *815 PENNSYLVANIA AVENUE, BETHLEHEM, PA 18018*  
 County: *LEHIGH* Region: *NORTHEAST*

**Administrator**

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

**Legal Entity**

Name: *BETHLEHEM MANOR SENIOR LIVING LLC*  
 Address: *815 PENNSYLVANIA AVENUE, BETHLEHEM, PA, 18018*  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *I-2* Date: *04/11/2017* Issued By: *PA LI*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *80* Waking Staff: *60*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Complaint* Exit Conference Date: *09/14/2023*

**Inspection Dates and Department Representative**

*09/14/2023 - Off-Site: [REDACTED]*

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: *75* Residents Served: *42*

**Secured Dementia Care Unit**  
 In Home: *Yes* Area: *0* Capacity: *36* Residents Served: *16*

**Hospice**  
 Current Residents: *17*

**Number of Residents Who:**  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *42*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *38* Have Physical Disability: *0*

**Inspections / Reviews**

*09/14/2023 - Partial*  
 Lead Inspector: [REDACTED] Follow-Up Type: *Not Required*

NO DEFICIENCIES FOUND