

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

April 8, 2024

[REDACTED], ED  
MORAVIAN UNION OF KING'S DAUGHTERS & SONS OF BETHLEHEM PA  
61 WEST MARKET STREET  
BETHLEHEM, PA, 18018

RE: MORAVIAN KING'S DAUGHTERS  
AND SONS HOME  
61 WEST MARKET STREET  
BETHLEHEM, PA, 18018  
LICENSE/COC#: 24214

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 02/22/2024 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]  
Acting Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: MORAVIAN KING'S DAUGHTERS AND SONS HOME License #: 24214 License Expiration: 02/14/2024  
 Address: 61 WEST MARKET STREET, BETHLEHEM, PA 18018  
 County: NORTHAMPTON Region: NORTHEAST

**Administrator**

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

**Legal Entity**

Name: MORAVIAN UNION OF KING'S DAUGHTERS & SONS OF BETHLEHEM PA  
 Address: 61 WEST MARKET STREET, BETHLEHEM, PA, 18018  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: C-1 Date: 08/01/1967 Issued By: L & I

**Staffing Hours**

Resident Support Staff: 13 Total Daily Staff: 32 Waking Staff: 24

**Inspection Information**

Type: Full Notice: Unannounced BHA Docket #:  
 Reason: Renewal Exit Conference Date: 02/22/2024

**Inspection Dates and Department Representative**

02/22/2024 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: 16 Residents Served: 15  
 Secured Dementia Care Unit  
 In Home: No Area: Capacity: Residents Served:  
 Hospice  
 Current Residents: 6  
 Number of Residents Who:  
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 15  
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 4 Have Physical Disability: 0

**Inspections / Reviews**

02/22/2024 Full  
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 03/22/2024

03/22/2024 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: 04/05/2024  
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 03/31/2024

Inspections / Reviews *(continued)*

04/08/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/05/2024

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

18 - Compliance With Laws

1. Requirements

2600.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

The carbon monoxide detector located outside of the furnace room included a label on the batteries, indicating they were last changed on 1/4/23. The Care Facilities Carbon Monoxide Standards Act requires the batteries to be changed annually.

Plan of Correction

Accept (████ - 03/22/2024)

On the day of the inspection, 02/22/24 the battery was changed and marked with the date of 02/22/24. Maintenance is required to check and test all carbon monoxide detectors on a monthly basis and record them in the log. If there is a vacancy for the maintenance position, the Co-Administrator is responsible to perform checks until the position is filled.

Licensee's Proposed Overall Completion Date: 03/22/2024

Implemented (████ - 04/08/2024)

51 - Criminal Background Check

2. Requirements

2600.

51. Criminal History Checks - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Description of Violation

At the time of the inspection, the Administrator's criminal background check was not available and unable to be verified. The Administrator's date of hire was █████.

Plan of Correction

Accept (████ - 03/22/2024)

A new criminal background check was completed on █████ to replace the original that was missing. Background checks are completed on the first day of hire. The Co-Administrator is responsible to audit all new employee files upon completion of orientation.

Licensee's Proposed Overall Completion Date: 03/22/2024

Implemented (████ - 04/08/2024)

91 - Telephone Numbers

3. Requirements

2600.

91. Emergency Telephone Numbers - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

Description of Violation

Resident #1's landline phone, located in their room, did not have the required list of emergency phone numbers posted nearby.

## 91 Telephone Numbers (continued)

**Plan of Correction**

Accept (█ - 03/22/2024)

The required list of emergency phone numbers was posted in resident #1's room on 02/23/24. The Co Administrator is responsible to have the posting checklist completed on a monthly basis to ensure that all required items, including the posting of emergency phone numbers in residents' rooms, are present.

Licensee's Proposed Overall Completion Date: 03/22/2024

Implemented (█ - 04/08/2024)

## 185a - Implement Storage Procedures

**4. Requirements**

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

**Description of Violation**

Resident #2 has an order for their blood glucose to be measured twice daily. The following PM blood glucose documentation was noted on the resident's medication administration record, but did not have a corresponding reading noted in their glucometer.

**Plan of Correction**

Accept (█ - 03/22/2024)

The Co Administrator, Nursing Supervisor, is conducting a refresher training on 03/13/24 to cover medication administration, documentation, and proper use of and documentation of glucometer readings. The Co Administrator, Nursing Supervisor, is responsible to conduct monthly audit of medication records and cart by the 30th of each month as outlined on the homes annual tickler system "Due Monthly and Other Time Spans". The Administrator shall be responsible to ensure that the Co Administrator, Nursing Supervisor, is completing these audits.

Licensee's Proposed Overall Completion Date: 03/22/2024

Implemented (█ - 04/08/2024)

## 187a - Medication Record

**5. Requirements**

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

**Description of Violation**

Resident #4 has an order for a █ to be given to them daily, but there was no documentation on █ that the patch was administered.

**Plan of Correction**

Accept (█ - 03/22/2024)

The Co Administrator, Nursing Supervisor, is conducting a refresher training on 03/13/24 to cover medication administration, documentation, and proper use of and documentation of glucometer readings. The Co Administrator, Nursing Supervisor, is responsible to conduct monthly audit of medication records and cart by the 30th of each month as outlined on the homes annual tickler system "Due Monthly and Other Time Spans". The Administrator shall be responsible to ensure that the Nursing Supervisor is completing these audits.

Licensee's Proposed Overall Completion Date: 03/22/2024

187a - Medication Record (continued)

Implemented ( ) - 04/08/2024

187d - Follow Prescriber's Orders

6. Requirements

2600.

187.d. The home shall follow the directions of the prescriber.

Description of Violation

Resident #4 has an order to receive [redacted] only if [redacted] Blood Glucose Reading is under [redacted]. On [redacted], the medication was administered to the patient despite [redacted] BG level being under the [redacted]

Plan of Correction

Accept ( ) - 03/22/2024

The Nursing Supervisor is conducting a refresher training on 03/13/24 to cover medication administration, documentation, and proper use of and documentation of glucometer readings. The Co-Administrator, Nursing Supervisor, is responsible to conduct monthly audit of medication records and cart by the 30th of each month as outlined on the homes annual tickler system "Due Monthly and Other Time Spans". The Administrator shall be responsible to ensure that the Nursing Supervisor is completing these audits.

Licensee's Proposed Overall Completion Date: 03/22/2024

Implemented ( ) - 04/08/2024

227d - Support Plan Medical/Dental

7. Requirements

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

Resident #3 is assessed to need the assistance of a bed enabler bar for purposes of turning and positioning in bed and transferring in/out of bed. However, the resident's support plan does not include risks associated with use of the bed enabler, the resident's ability to use the device safely for the purpose it was intended, identification of the specific device to be used, and whether a cover is required to meet FDA guidelines.

Repeat violation 2-7-23

Plan of Correction

Accept ( ) - 03/22/2024

Resident #3 RASP was updated on [redacted] by the Co-Administrator, Nursing Supervisor, to indicate the risks associated with the use of the bed enabler, the resident's ability to use the device safely, identification of the device in use, and that a cover is required. To ensure that the use of bed enablers are documented correctly, the Co-Administrator, Nursing Supervisor, is responsible to conduct monthly audits of resident medical charts by the 10th of every month as outlined in the homes Annual Tickler System section "Due Monthly and Other Time Spans". The Administrator shall be responsible to ensure that the Co-Administrator, Nursing Supervisor, is completing these audits.

Licensee's Proposed Overall Completion Date: 03/22/2024

Implemented ( ) - 04/08/2024

227d - Support Plan Medical/Dental (*continued*)